STYLE: QUESTIONS & ANSWERS ON

SEXUAL HEALTH

emergency birth control • all other birth control options • options if you think you may be pregnant
planning your pregnancy • sexually transmitted diseases • puberty and reproduction
gay, lesbian and bisexual issues • rape and abuse • community resources

Respectfully Sexual...YES each step of the way!

If you and someone else are going to get sexually intimate (e.g. sexual contact, giving sexual compliments), you AND the person you're doing it with have to CLEARLY agree to it before you start.

You and the other person have to agree with words; agreement using "body language" doesn't count.

You and the other person can't be under the influence of alcohol or any other kind of drug for sexual intimacy to be truly agreed to by you and the other person.

It's not ok to take advantage of someone who is under the influence of alcohol or any other kind of drug.

If you and someone you are with are making out and things are getting more and more sexually intimate (e.g. if you and the other person go from kissing while fully clothed to undressing), both you and the person you are with have to clearly say in spoken words that getting more and more intimate is ok BEFORE getting more intimate.

If you or the person you are with wants to suggest getting more sexually intimate, the person who wants to get more intimate HAS THE RESPONSIBILITY of getting the verbal ok of the other person BEFORE getting more intimate.

If you have gotten to a certain level of sexual intimacy before with someone, you and the someone you are with have to get the verbal ok from each other to go back to that level of sexual intimacy each time sexual contact is made.

If you have a sexually transmitted disease, you have to tell it to someone you may have sexual contact with BEFORE you make sexual contact.

NEVER ASSUME an ok has been given to get more sexually intimate unless the ok was clearly spoken in words.

Silence, or not resisting a sexual advance does not mean it's ok to increase sexual intimacy. Without a clear verbal ok it's not ok.

Adapted from the Sexual Violence and Safety Policy, Ohio Antioch College

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table of contents

■ **RESPECTFULLY SEXUAL**

■ **EMERGENCY BIRTH CONTROL** ____ 5
General information ____ 5
Emergency birth control pills ____ 6
Emergency copper IUD ____ 7

■ **BIRTH CONTROL** ____ 10
General information ____ 10
The birth control methods ____ 11
- Abstinence ____ 12
- Breast feeding ____ 14
- Cervical cap ____ 18
- Condoms for females ____ 21
- Condoms for males ____ 24
- Depo-Provera® ____ 28
- Diaphragm ____ 33
- IUD (intra-uterine device) ____ 37
- Lea Shield® ____ 40
- Lunelle® ____ 43
- Mini-pill (progestin only pill) ____ 45
- Natural family planning and fertility awareness ____ 49
- Norplant® implant system ____ 57
- The pill (estrogen/progestin pill) ____ 62
- Spermicides ____ 68
- Sponge ____ 71
- Sterilization of female ____ 74
- Sterilization of male ____ 77
- Withdrawal ____ 80

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table of contents

- **PREGNANCY OPTIONS**
  - Am I pregnant? 82
  - Keeping your baby 84
  - Adoption and foster care 84
  - Abortion 84
- **PLANNING YOUR PREGNANCY** 87
- **SEXUALLY TRANSMITTED DISEASES (STDS) AND OTHER REPRODUCTIVE INFECTIONS** 91
  - General information 91
  - The STDs and other reproductive infections 91
  - Bacterial vaginosis 96
  - Chlamydia 97
  - Gonorrhea 99
  - Hepatitis A 101
  - Hepatitis B 102
  - Hepatitis C 103
  - Herpes 104
  - HIV/AIDS 106
  - Human papilloma virus 107
  - Public lice and scabies 109
  - Syphilis 110
  - Trichomoniasis 112
  - Yeast infections 113

table of contents

- **PUBERTY AND REPRODUCTION** ____ 114
  - Puberty ____ 114
  - Changes just for girls and female reproduction ____ 115
  - Changes just for boys and male reproduction ____ 119
- **GAY, LESBIAN, BISEXUAL**
  - General information ____ 121
  - Getting support ____ 121
  - STD protection ____ 122
- **RAPE AND ABUSE** ____ 123
  - General information ____ 123
  - Rape ____ 123
  - Cycle of abuse ____ 124
  - Getting out of an abusive relationship ____ 125
- **COMMUNITY RESOURCES** ____ 128
- **ILLUSTRATION CREDITS**
- **BIBLIOGRAPHY**

1 877 957 8953

emergency birth control

GENERAL INFORMATION

what is emergency birth control?

It's a birth control method that is used after sexual intercourse to prevent pregnancy when:

- no other birth control was used; or
- female or couple thinks the birth control may not have worked (e.g. if a condom breaks)

Emergency birth control does not protect against sexually transmitted diseases.

what methods of emergency birth control are available?

1. emergency birth control pills
2. a copper intra-uterine device (copper IUD)

how long after sex can I wait before getting emergency birth control?

- you can choose between emergency birth control pills and the copper IUD if you get to a clinic ***within the first 72 hours*** after unprotected intercourse,
- you can still choose the pills if you get to a clinic past 72 hours after unprotected intercourse ***(the pills are less effective after 72 hours but they are still an option up to 5 days)***
- you can choose the ***copper IUD up to 7 days after unprotected intercourse*** (but if you live outside of Whitehorse, Dawson or Watson Lake, you may have to consider travel time to a community that has a health care provider who can put in an IUD.

what if I don't get my period after I take emergency birth control?

Your next period should begin within 2-3 weeks. If your period has not started within 3 weeks, it is important to see a health care provider to get a pregnancy test.

emergency birth control

where can I get emergency birth control?

- doctor's office
- nursing station or health centre
- Yukon Communicable Disease Control (#4 Hospital Road)
- hospital
- pharmacy (prescription is required)

Remember, the sooner you use it the better it works!
(you **CAN** wait until morning time before calling or going in).

EMERGENCY BIRTH CONTROL PILLS

how do emergency birth control pills work?

It is not fully understood how the pills prevent pregnancy. They may:

- prevent an egg from being released by your ovaries
- make it difficult for sperm and / or an egg to move through the female's reproductive system
- prevent a fertilized egg from attaching itself to the wall of the uterus
- interfere with early cell division

how effective are emergency birth control pills?

- experience shows that of all females who take emergency birth control pills in the first 72 hours after unprotected intercourse, only about 2% get pregnant
- the sooner you take the pills after sex the greater the chances the pills will work
- as stated before, you ***can*** take the pills up to 5 days after having sex; just remember that there will be a smaller chance of preventing pregnancy the longer you wait

are there any side effects to emergency birth control pills?

- 50% of females feel sick to their stomach
- 20% of females throw up
- some females find that their menstrual cycle gets disrupted for a short while

emergency birth control

You can take medicine called Gravol to make you feel less sick. Your health care provider or pharmacist will know how you can get Gravol.

are emergency birth control pills available in all Yukon communities?

Yes. The pills are available in all Yukon communities at doctor clinics, nursing stations, health centres, Yukon Communicable Disease Control, hospitals and pharmacies (you need a prescription from a doctor to get the pills from a pharmacy).

if I'm already pregnant will the pills harm the baby?

No. Over the years, some females have accidentally taken them when they were pregnant. Studies show no increased risk of birth defects or other problems when the female decided to continue with the pregnancy. Therefore, there is no reason to suspect that one time emergency use of the pills would cause birth defects if the pills fail to prevent pregnancy or if they are taken after a female is already pregnant.

can any female use the pills?

Emergency birth control pills are ***extremely safe*** for almost all females.

how much do emergency birth control pills cost?

Emergency birth control pills are free at doctor clinics, nursing stations, health centres, Yukon Communicable Disease Control and hospitals.

how do I take the pills?

1. Take Gravol (to prevent vomiting)
2. Wait an hour. Take 2 emergency birth control pills
3. Repeat steps 1 and 2, 12 hours later

EMERGENCY COPPER IUD (INTRA-UTERINE DEVICE)

what is the emergency copper IUD?

It's a small flexible plastic and metal device that is put into the female's uterus by a trained health care provider. The device is usually removed by a health care provider once you get your next menstrual period.

how does the emergency copper IUD work?

It is not fully understood how the IUD works to prevent pregnancy. It may:

- make it difficult for sperm and / or an egg to move through the female's reproductive system

emergency birth control

- interfere with fertilization
- prevent a fertilized egg from attaching itself to the wall of the uterus

how effective is the emergency copper IUD?

- less than 1% of females who get the emergency copper IUD become pregnant

are there other benefits to the copper IUD?

Yes. Once the IUD gets put in, it may be possible for you to leave it in for several years. This will give you very effective long term birth control.

what are the risks of the copper IUD?

* The biggest risk is pelvic inflammatory disease (PID) which can potentially make it impossible for you to ever get pregnant. Untreated PID is life threatening. PID is normally caused by sexually transmitted diseases (STDs). You can reduce your risk of getting an STD when you and your sex partner don't have sex with anyone except each other. Your health care provider will talk with you about this and may suggest that you get STD tests and perhaps antibiotic medication before you get the IUD put in.

another risk of the copper IUD

- It's also possible to get a pregnancy that occurs in your fallopian tubes instead of in your uterus. This is extremely rare when the copper IUD is used as emergency birth control.

are there any side effects to the copper IUD?

- it may cause menstrual pain
- it may cause more menstrual bleeding

can any female use the copper IUD?

It may not be a good option:

- if you are very young
- if you or anyone you have had sex with has had sex with more than one person in the last while
- if you have an STD

Don't count yourself out of this option! Talk to a health care provider as soon as possible after unprotected sex so you can find out if the copper IUD is safe for you.

emergency birth control

is the copper IUD available in all Yukon communities?

You may have to travel to outside of your community for an emergency IUD if you live outside of Whitehorse. Your transportation costs to a community that has a clinician that can put in an IUD is free as long as you arrange your travel with your health care provider before you leave your community.

how much does it cost?

If you are status First Nations, the IUD is free. If you are not status First Nations the IUD will cost between $50 and $75.

birth control

BIRTH CONTROL

General information
The birth control methods

- Abstinence
- Breast feeding
- Cervical cap
- Condoms for females
- Condoms for males
- Depo-Provera
- Diaphragm
- IUD (intra-uterine device)
- Lunelle
- Mini-pill (progestin only pill)
- Natural family planning and fertility awareness
- Norplant implant system
- The pill (estrogen/progestin pill)
- Spermicides
- Sponge
- Sterilization of female
- Sterilization of male
- Withdrawal

GENERAL INFORMATION

what is birth control?

- a birth control method is any method used to avoid pregnancy

should I use birth control?

- birth control is a personal decision, you have to decide for yourself and with your partner
- all methods have benefits and risks

- you can increase your chances of finding a birth control method that works for you by understanding the full range of birth control options before making a choice
- if you are using a birth control method but you don't like it, it's your choice to stop using birth control or to switch to another method

talking to the people you're having sex with ...

- it's a good idea to talk about pregnancy and birth control with someone before you have sex with them
- if you and the person you have sex with agree that you want to avoid pregnancy but still have sex, birth control is a shared responsibility

what do the birth control failure rates mean?

- failure rates for the birth control methods are given as the failure rate for a couple using the birth control method for their first year

Here's an example: the failure rate of condoms is 14%. That means that the chances of getting pregnant the first year a couple uses condoms as their only birth control method is 14 out of 100.

- if you stay with the same birth control method for many years, the failure rate of your birth control method usually gets smaller over time as you get more skilled at using the method you have chosen
- you can also increase your chances of success by carefully following the instructions that come with the birth control method you choose

does birth control protect against STDs?

- only abstinence and condoms offer protection from STDs (STD is short for sexually transmitted disease)
- remember that condoms reduce the chances of STD transmission but they do not offer 100% protection against STD transmission

It takes 2 ... You can reduce your chances of pregnancy even more and reduce your chances of getting an STD by using condoms plus another birth control method.

- ***For information on emergency birth control, please refer to page 5***

abstinence

method name

ABSTINENCE

description

Abstinence can mean many things depending on your values. For preventing pregnancy, abstinence means avoiding contact between penis and vagina.

failure rate (chances of getting pregnant the first year a couple uses this method)

0%

how does it work?

Prevents sperm cells from joining egg cells; penis or sperm does not enter the vagina.

how much does it cost?

free

what are the advantages?

menstrual

- no hormone side effects

sexual, psychlogical

- can increase self esteem and positive self image if considered the right / moral approach

cancers, tumours, masses

- none
- protection against STDs
- no medical side effects
- can be started at any time

what are the disadvantages and challenges?

menstrual

- none

sexual, psychological

- may feel as though you are "missing out"

cancers, tumors, masses

- none

abstinence

other

- requires commitment and self-control
- couples may not have a birth control method handy if they stop abstaining from sex
- one partner may pressure other not to abstain from sex

what can go wrong?

- individual may be in a situation where she or he would like to abstain from sex but the other person wants to have sex; people, usually females have been raped, beaten and abused in other ways for refusing to have sex

who tends to choose this method?

- individuals or couples who feel that they can control a sexual situation
- people who can handle peer pressure

how do you start using this method?

- both individuals agree to abstain from sex by talking about it with each other
- an individual or couple can "return to abstinence" after being in a sexual relationship, after an abortion or after a birth

what are the instructions?

- have ground rules for self and partner
- if male and female agree that they will eventually stop abstaining from sex, couple must discuss in advance whether they will use another birth control method or accept the high chance of a pregnancy
- have condoms available
- know where to get emergency birth control

what kinds of problems are there when you use this method and what do you do about them?

- you may need practice and help in setting personal boundaries and a physical affection limit

how soon after you stop using this method can you get pregnant?

- immediately; abstinence protects your fertility because of the reduced risk of getting an STD

breast feeding

method name

BREAST FEEDING

description

Birth control for breast feeding female (baby's diet = 90%-100% breast milk), when her period hasn't returned yet (spotting that occurs in the first 8 weeks after birth does not count as period returning) and the newborn is less than 6 months old.

failure rate - chances of getting pregnant the first six months a couple uses this method

2%

failure rate when used with male condom - chances of getting pregnant the first six months a couple uses these methods

0.3%

how does it work?

Baby sucking on the mother's nipple causes an increase in a natural hormone called prolactin. The prolactin prevents eggs from being released from the mother's ovaries.

how much does it cost?

free

what are the advantages?

menstrual

- suppresses having your period

sexual, psychological

- breast feeding is pleasurable to some women

cancers, tumors or masses

- slight protective effect against pre-menopausal breast cancer and ovarian cancer in mother

other

- can be used immediately after child birth

breast feeding

- provides the healthiest food for the baby
- protects baby against juvenile asthma and diarrhea
- can increase bonding between mother and child
- helps mother lose weight after birth

what are the disadvantages and challenges?

menstrual

- it can be hard to know when the mother's ovaries will begin releasing eggs

sexual, psychological

- some females are uncomfortable using this method in public

cancers, tumors, masses

- none

other

- no STD protection
- effectiveness after 6 months is reduced; should be used with another method
- frequent breast-feeding may be inconvenient
- if the mother is HIV+, there is a chance that the HIV will be passed to infant
- sore nipples and breasts, swollen breasts
- difficult when there is a small milk supply

what can go wrong?

- swollen breasts (mastitis)

who tends to choose this method?

- females who are fully breastfeeding (at least 90% of baby's food is breast milk)
- female whose infant is less than 6 months old
- female whose period has not returned after giving birth
- some teens find this method difficult

breast feeding

how do you start using this method?

- start breast feeding immediately after child birth
- breast feed ***at least*** every four hours in the daytime, ***at least*** every six hours at night, more is better
- consider using a back up method of birth control like condoms

what are the instructions?

- breast feed consistently and correctly, if you are having trouble breast feeding talk to your health care provider as soon as possible for help
- ensure breast milk is at least 90% of baby's food

what kinds of problems are there when you use this method and what do you do about them?

low milk supply

- commonly caused by not breast feeding enough
- also caused by being tired and stressed
- try breast feeding every 1-2 hours right after giving birth
- try to breast feed 8-10 times a day, get lots of rest, take in lots of fluid and iron supplements

sore nipples

- commonly caused by incorrect positioning of the baby to the breast
- learn about different ways of latching and sucking (this improves with practice)
- clean your nipples before and after sucking to lower the chances of nipple infection and soreness

sore breasts

- put heat on sore areas
- breast feed often or use pump to get excess milk out of breasts

other

- stress, fear, lack of confidence, lack of social support and poor nutrition can cause problems; having a social support network to help you in the first months after birth is important

how soon after you stop using this method can you get pregnant?

- immediately

where else can I go for information?

- call La Leche League at 667-4574 or your local nursing station or health centre

cervical cap

method name

CERVICAL CAP

description

A thimble shaped latex rubber device with a small groove in its inner surface that creates suction to keep cap on cervix. A small amount of spermicide is placed inside the cap before female puts it on.

failure rate - chances of getting pregnant the first year a couple uses this method

40% if female has already had children
20% if female has not had children

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

5.6% if female has already had children
2.8% if female has not had children

how does it work?

Blocks sperm from entering the uterus and the spermicide damages sperm.

how much does it cost?

$50 - $75 for the cap. Free if you're status First Nation. Everyone has to pay for the spermicide which costs up to $25 / tube.

what are the advantages?

menstrual

- holds back blood during sexual intercourse

sexual, psychological

- controlled by the female
- can be put in up to 6 hours before sexual intercourse
- female can leave in place for up to 48 hours, does not have to be replaced with each act of intercourse

cancers, tumors and masses

- none

other

- may reduce risk of cervical infections

what are the disadvantages and challenges?

menstrual

- none

sexual, psychological

- you have to put it in before sex
- bad smell may develop if cap is left in place too long, if not properly cleaned, or if used during bacterial vaginosis infection

cancers, tumors and masses

- labeling requires repeat Pap smear at 3 months after beginning this method; increased risk of pre-cancerous cells (cervical dysplasia) for first 3 months of using this method

other

- no protection from STDs
- female must go to health care provider to get right size of cervical cap

what can go wrong?

- may increase chance of infection of urinary tract
- some females' cervix changes size during their cycle and they may need 2 different sized cervical caps

who tends to choose this method?

- females willing and able to place the cap on their cervix and remove it
- females with a smooth cervix
- teens can use it, but it may be hard to get the right fit

how do you start using this method?

- health care provider must measure female's cervix and will show female how to use the cervical cap properly

what are the instructions?

Before beginning sexual intercourse:

1. fill the bottom third of the inner part of the cap with spermicide jelly
2. test the fit to make sure when you put the cap in, your cervix is covered, and there are no gaps between the cervix and the cap; after suction develops for about 1 minute, the cap should stay on

cervical cap

3. after sexual intercourse, leave the cap on for at least six hours
4. if you have intercourse more than once that time, you don't have to take off the cap to put on more spermicide, but check to make sure the cap is still on the cervix
5. to remove the cap, put a finger into your vagina until you can feel the rim of the cap
6. press the cap rim until the seal against the cervix is broken, then tilt the cap off the cervix
7. hook your finger around the rim and pull it sideways out of the vagina
8. wash, rinse, dry the cap and store it in a cool, dark and dry place - rinsing it in Listerine® can prevent odors
9. don't use the cap for more than 48 hours at a time OR if you have an infection in your reproductive organs OR during your period
10. don't use petroleum based products with the cap like Vaseline® or baby oil
11. use a back up method with the cap the first few times you use it (e.g. condoms) until you're sure you are using the cap successfully
12. if you are going to a health care provider for a pelvic exam, don't use the cap during the 3 days before going in for the exam, use a back up method instead (e.g. condoms)

what kinds of problems are there when you use this method and what do you do about them?

- spotting, sore cervix, cervical erosion: stop using the cap and allow your cervix to heal, get a refit for a larger cap
- you feel the cap didn't work: get emergency birth control

how soon after you stop using this method can you get pregnant?

It's possible to get pregnant right away after you stop using the cervical cap.

method name

CONDOMS FOR FEMALES

description

A plastic (polyurethane) device placed into the vagina.

failure rate - chances of getting pregnant the first year a couple uses this method

21%

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

not applicable

how does it work?

Female condoms act as a mechanical barrier; they trap sperm cells in a sac in the vagina so they can't enter the female's uterus.

how much does it cost?

A box of 3 female condoms costs about $12.

what are the advantages?

menstrual

- no hormones

sexual, psychological

- less fear of STDs
- provides option to female who can't get male to use male condoms
- can be put in vagina up to 8 hours before sex
- can be used by couples when male cannot keep his penis hard if he uses the male condom

cancers, tumors and masses

- possible decrease in transmission of the human papilloma virus which is thought to be a cause of cervical cancer

condoms for females

other

- in theory, may provide greater protection against STDs than male condoms because it covers a larger area of the reproductive organs
- hardly ever breaks
- latex allergy does not occur
- good option during breast feeding

what are the disadvantages and challenges?

menstrual

- none

sexual, psychological

- difficult to place in the vagina
- penis must be placed manually into the condom; male may accidentally place his penis outside the female condom
- male must pay attention to possible friction between device and penis (and stop if friction develops)
- may have to hold onto the rim around the outside of the vagina
- inner ring may cause discomfort

cancers, tumors and masses

- none

other

- expensive

what can go wrong?

- can cause infection if left for a long time in vagina
- can cause changes in natural microbes in vagina if left in for a long time

who tends to choose this method?

- females, when birth control method controlled by female is required
- anyone who can use condoms consistently and correctly
- couples in the first weeks after childbirth to avoid pelvic infection in mother

condoms for females

how do you start using this method?

- couple agrees in advance to use female condom every time they have sex
- female practices putting in female condom before starting to use this method

what are the instructions?

1. you must put in the female condom before your vagina touches any part of your sex partner's penis, vagina, anus or any part of your partner's body where there may be body fluid
2. put the closed end high in the vagina with the inner closed ring holding the condom in place
3. arrange the outer ring against the outer lips of the vagina
4. to remove the female condom, squeeze and twist the outer ring to keep your partners body fluid such as sperm inside the pouch - pull out the condom gently - this should be done after sex and before you stand up

what kinds of problems are there when you use this method and what do you do about them?

- penis gets inserted in vagina but outside the female condom: pay attention to where the penis is

how soon after you stop using this method can you get pregnant?

- condoms increase your ability to get pregnant when you stop using them; this is because they decrease the risk of STD infection and many STDs can cause permanent damage to your reproductive system

condoms for males

method name

CONDOMS FOR MALES

description

A cover or sheath made of latex, polyurethane or natural membranes; worn over the penis when it is hard / erect.

failure rate - chances of getting pregnant the first year a couple uses this method

14%

how does it work?

Condoms act as a mechanical barrier; they prevent sperm in semen from entering the vagina.

how much does it cost?

About $5-$12 for a box of 12; condoms are free in many clinics and community centres.

what are the advantages?

menstrual

- none

sexual, psychological

- reduced risk of sexually transmitted disease
- male involvement is encouraged
- males "last longer" when they use condoms
- risk of infertility (can't ever get pregnant because of damage to reproductive organs) is reduced

cancers, tumors and masses

- possible decrease in transmission of the human papilloma virus which is thought to be a cause of cervical cancer

other

- good option during breast feeding
- easy to get

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condoms for males

what are the disadvantages and challenges?

menstrual

- none

sexual, psychological

- requires some practice to use properly
- both partners must be comfortable placing the condom on the penis
- buying, convincing other partner to use it, putting it on and taking it off may be embarrassing
- may interrupt sex unless put on by female as part of foreplay
- possible decrease enjoyment of sex
- some males cannot keep their penis hard when they use a condom

cancers, tumors and masses

- none

other

- some people are allergic to latex: polyurethane condom can be used instead
- oil-based lubricants like Vaseline® will cause holes in condoms
- user must be careful not to tear condom when putting it on
- a condom may not be handy when it's needed
- opening condom package in "heat of the moment" may be difficult

what can go wrong?

- latex allergy (rare)
- infection to female caused by leaving condom in vagina for a long time (lost and forgotten)

who tends to choose this method?

- any sexually active male or couple
- individuals and couples who want to reduce the risk of getting an STD
- couples who want sexual intercourse to last longer
- sex in the first few weeks after giving birth when pelvic infection can occur to mothers

condoms for males

- pregnant females at risk of any kind of infection
- anyone who has an STD
- condoms are an excellent method for teens who know how to use them and who can use them every time they have sex

how do you start using this method?

- couple agrees in advance to use condoms every time they have sex

what are the instructions?

1. check the expiry date - all condoms have expiry dates and they should not be used if they are past their expiry date;
2. carefully remove the condom from its wrapper without ripping it;
3. make sure the condom is pointing in the right direction;
4. roll the condom on the erect penis before the penis touches your partner's vagina, penis, anus or any part of your partner's body where there may be body fluid;
5. as you roll it on, leave a space at the end of the condom at the top of the penis - the space should be about half an inch long - squeeze the tip to remove any air - most condoms have this space already built into the condom - it's called the reservoir;
6. smooth out any air bubbles;
7. once you have ejaculated, in other words, once the semen or sperm has left your penis, your penis will get soft pretty quickly - you should hold onto the condom at the bottom of your penis and withdraw your penis out of your partner;
8. roll the condom partially off your penis then slide it off;
9. tie or wrap the used condom and throw it away in the garbage.

what kinds of problems are there when you use this method and what do you do about them?

- condom breaks or slips off: if this happens over and over again switch condom brands. Use emergency birth control when condom breaks or slips off

how soon after you stop using this method can you get pregnant?

- condoms increase your ability to get pregnant when you stop using them; this is because they decrease the risk of STD infection and many STDs can cause permanent damage to your reproductive system

Depo-Provera®

method name	**DEPO-PROVERA®**
description	A progestin that is injected into a female's arm or bum cheek once every 11-13 weeks. The progestin is a hormone (a hormone is a chemical that affects how our body functions).
failure rate - chances of getting pregnant the first year a couple uses this method	0.3%
failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods	almost 0%
how does it work?	• prevents eggs from being released by the female's ovaries • makes if difficult for sperm and / or an egg to move through the female's reproductive system • makes the lining of the uterus thin and not ready to receive a fertilized egg
how much does it cost?	About $40 per dose (a dose lasts about 3 months). Free if you're status First Nation.
what are the advantages?	menstrual • less menstrual cramps and pain • less pain around the time an egg is released from your ovaries (ovulation) • may improve side effects of endometriosis • less menstrual blood loss once you've been on it for a while

sexual, psychological

- don't have to worry about birth control at the time you're having sexual intercourse
- more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely

cancers, tumors and masses

- may reduce risk of cancer of the ovaries and cancer of the endometrium (lining of the uterus)

other

- greatly reduces risk of pregnancy in your fallopian tubes (ectopic pregnancy)
- only have to remember once every 3 months
- privacy: no one has to know you are using this method
- remains effective if you return a week or two weeks late for a shot

what are the disadvantages and challenges?

menstrual

- often causes unwanted menstrual cycle changes and irregular bleeding, especially during the first year you use it
- less than a third of users have regular menstrual periods their first year on Depo
- pre-menstrual syndrome symptoms may become worse (but they usually get better rather than worse)

sexual, psychological

- may reduce sex drive, vaginal moisture during sexual arousal, and ability to have orgasms
- increased days of spotting interferes with sex for some females
- depression may become worse (even though it is more likely to get better)
- female may feel mood changes, fatigue and anxiety

Depo-Provera®

cancers, tumors and masses

- there is no evidence that females using Depo have an overall increased risk of developing cancers
- some evidence that Depo may speed up the presentation of already existing breast cancer

other

- no STD protection
- must return every 3 months for injection (difficult for some females)
- increased appetite and / or weight gain
- may increase risk of osteoporosis, especially when used by teens
- may cause severe headaches

what can go wrong?

- persistent, excessive weight gain (rare)
- severe depression (rare)

who tends to choose this method?

- females who want effective birth control AND who can return for injection every 3 months
- females who have difficulty remembering to take a birth control pill every day and who prefer a birth control method that is not necessary to remember during the time of the sexual act
- can be used during breast feeding

how do you start using this method?

- visit your health care provider; he or she will be able to give you the Depo shot
- if it's your first time getting Depo, when you book an appointment, tell the person you are booking with that you are thinking about getting Depo-Provera®, they may have more instructions for you

what are the instructions (after getting the shot)?

- do not massage the area where you got the shot for the first few hours
- expect irregular bleeding; the amount of bleeding usually decreases over time; after 6-12 months there is usually very little or no vaginal bleeding
- also expect very light bleeding or no menstrual bleeding at all; this is not harmful
- return to your health care provider at any time if the bleeding is bothersome; you can get medicines that make the pattern of bleeding more acceptable
- weight gain is common; average first year weight gain is 3 to 4.5 pounds: eat well and get plenty of exercise
- return to your health care provider in 11 or 12 weeks for your next shot
- if more than 13 weeks has passed since your last shot, avoid sexual intercourse or use another birth control method
- Depo is very safe: return to your health care provider if you have: frequent very painful headaches, heavy bleeding, depression, severe pain in your lower stomach (abdominal) area, pus from your vagina, prolonged pain or bleeding from the spot where you got the needle
- the effect of Depo on your bones is not fully understood: taking calcium supplements, getting exercise and avoiding smoking are good for your bones

what kinds of problems are there when you use this method and what do you do about them?

weight gain

- exercise and eat healthy foods

irregular and / or heavy bleeding

- see above, if problem is unacceptable see your health care provider

no menstrual bleeding (amenorrhea)

- this is common among Depo users and is not harmful

Depo-Provera®

depression

- see your health care provider if you get depression or if your depression gets worse

dryness in vagina

- try using a vaginal lubricant (like k-y jelly); see your health care provider

pain where you got your shot

- this is common and should go away in a few days after getting your shot; do not massage the site in the first few hours after getting your shot as it will decrease the effectiveness of the Depo

how soon after you stop using this method can you get pregnant?

- the ***average*** delay that Depo users have from the time they stop using it to when they can get pregnant is 10 months
- 90% of females who stop using Depo because they want to get pregnant become pregnant within 18 months after their last Depo shot

diaphragm

method name

DIAPHRAGM

description

Rubber dome-shaped device filled with spermicide and put in the vagina to cover the cervix.

failure rate - chances of getting pregnant the first year a couple uses this method

20%

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

2.8%

how does it work?

Blocks sperm from entering the uterus and spermicide damages sperm.

how much does it cost?

$60-$65 for the diaphragm. Free if you're status First Nation. Everyone has to pay for the spermicide which costs up to $25 / tube.

what are the advantages?

menstrual

- none

sexual, psychological

- controlled by female
- you can put it in vagina up to 6 hours before sexual intercourse

cancers, tumors and masses

- reduces risk of cervical dysplasia

other

- reduces risk for infection of cervix by certain STDs and pelvic inflammatory disease (PID)
- can be used while breastfeeding after vagina and cervix have returned to their "non-pregnant" shape

diaphragm

what are the disadvantages and challenges?

menstrual

- none

sexual, psychological

- you have to put it in before sexual contact, may interrupt foreplay
- taste of spermicide may discourage certain foreplay activities
- can be messy if you repeat sexual intercourse because you have to check that the diaphragm is in place and put more spermicide in the vagina each time the male ejaculates / has an orgasm and sperm comes out of his penis

cancers, tumors and masses

- none

other

- no STD protection
- you have to go to a health care provider to get the right size of diaphragm
- the diaphragm may get a bad smell if it's not cleaned properly

what can go wrong?

- increased risk of getting an infection of the urinary tract (the system that stores and flushes out pee)
- increased risk of toxic shock syndrome, especially if you leave the diaphragm in for a long time or during your period
- a large diaphragm that is not properly fitted for you can damage your cervix

who tends to choose this method?

- females who can plan ahead when they will have sexual intercourse
- is more effective for females who are beyond their teen years

how do you start using this method?

- health care provider must measure female's cervix and will show female how to use the diaphragm properly
- know how to get emergency birth control

diaphragm

what are the instructions?

1. fill the inner surface of the diaphragm two thirds full with spermicide before putting it in the vagina (about 2 teaspoons of spermicide); you can put it in the vagina up to 6 hours before penis touches or goes into the vagina
2. check to make sure the diaphragm is in place before sexual intercourse and re-check to make sure it's in place each time the male ejaculates / has an orgasm - but don't remove the diaphragm
3. each time the male ejaculates, put more spermicide in the vagina using a spermicide applicator tube - but don't remove the diaphragm
4. leave the diaphragm in place for at least 6 hours after the last act of sexual intercourse
5. after you take the diaphragm out, clean, rinse, dry and store it in a cool, clean, dry, dark place
6. don't use petroleum based products with the diaphragm like Vaseline® or baby oil
7. use a back up method with the diaphragm the first few times you use it (e.g. condoms) until you're sure you are using the diaphragm successfully
8. every once and a while, check to see if there are any holes or cracks in the diaphragm, or if it's getting stiff; get a new diaphragm if you find any defects
9. bring your diaphragm with you to your health check ups; let your health care provider inspect the diaphragm for defects
10. replace the diaphragm every 2 years
11. recheck the fit with the health care provider if you loose or gain more than 20 pounds or after giving birth

diaphragm

what kinds of problems are there when you use this method and what do you do about them?

- latex allergy: if this occurs, switch to another birth control method
- infection of the bladder (cystitis): pee after sexual intercourse to reduce risk of cystitis

how soon after you stop using this method can you get pregnant?

- it's possible to get pregnant right away after you stop using the diaphragm; diaphragms reduce the risk of pelvic inflammatory disease so they protect your ability to become pregnant.

IUD (intra-uterine device)

method name

IUD (INTRA-UTERINE DEVICE)

description

A small, flexible plastic and metal device, shaped like the capital letter "T", put into a female's uterus by a health care provider. The device has 2 short strings attached to its end.

failure rate - chances of getting pregnant the first year a couple uses this method

0.8%

failure rate when used with male condom -chances of getting pregnant the first year a couple uses these methods

almost 0%

how does it work?

It is not fully understood how an IUD works to prevent pregnancy. It may:

- make it difficult for sperm and / or an egg to move through the female's reproductive system
- interfere with fertilization
- prevent a fertilized egg from attaching itself to the wall of the uterus

how much does it cost?

$50-$75. Free if you're status First Nation.

what are the advantages?

menstrual

- no hormone side effects
- can be put in right after child birth and any time during the month in a female's cycle as long as the female is not pregnant

sexual, psychological

- don't have to worry about birth control on a daily basis or around the time you're planning to have sexual intercourse

IUD (intra-uterine device)

- more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely

cancers, tumors and masses

- probably lowers risk of cancer of the lining of the uterus (endometrial cancer)
- may lower risk of cancer of cervix

other

- can be left in place for many years
- reduces risk of pregnancies occurring in fallopian tubes (ectopic pregnancy)
- can be used while breast feeding
- very inexpensive over time

what are the disadvantages and challenges?

menstrual

- more blood loss between menstrual periods (spotting)
- more blood loss during menstrual periods
- may increase menstrual pain

sexual, psychological: none

cancers, tumors and masses: none

other

- does not protect against STDs
- may come out of uterus by itself
- pain during the time when the IUD is put in and when it is removed

what can go wrong?

- pelvic inflammatory disease: rare - if it occurs it usually happens shortly after the time when the IUD was put in the uterus
- fainting when the IUD is put in the uterus
- tearing of the uterine wall when the IUD is being put in: rare
- if pregnancy occurs when IUD is in place, IUD should be removed as

IUD (intra-uterine device)

soon as possible, a spontaneous abortion may occur whether or not the IUD is left in

who tends to choose this method?

- females with only one sex partner (and her sex partner only has her for a sex partner) - no "sleeping around"
- females who want safe, effective long term birth control
- females who need emergency birth control
- may not be good long term option for many teens and young adults since they tend to change sex partners

how do you start using this method?

- IUD is put in by health care provider, talk to your health care provider about this: you may have to come to more than one visit before getting the IUD
- usually put in within 5 to 7 days after start of your period (this is not essential, but is the easiest time in the month to do it)

what are the instructions?

- take ibuprofen 200-600 mg before health care provider inserts IUD
- your health care provider inserts IUD
- your health care provider will teach you how to check for strings

what kinds of problems are there when you use this method and what do you do about them?

IUDs are extremely safe: check with your health care provider immediately if any of these problems occur:

- frequent spotting, very heavy menstrual bleeding
- moderate to severe cramping or pain
- IUD partially or completely comes out of your uterus into your vagina
- your sex partner feels pain on his penis due to the IUD strings
- you can't find the IUD strings
- you think you may be pregnant

how soon after you stop using this method can you get pregnant?

- it's possible to get pregnant right away after you stop using the IUD

Lea Shield®

method name	**LEA SHIELD®**
description	A barrier form of contraception that is made from hypoallergenic, high grade silicone. The barrier is placed at the cervix and used with a spermicidal jelly.
failure rate - chances of getting pregnant the first year a couple uses this method	20% according to Planned Parenthood of British Columbia 2.5% according to the company that makes this product
failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods	2.8% (using Planned Parenthood's baseline of 20% failure rate without condoms) 0.4% (using the company's advertised failure rate without condoms as the baseline failure rate)
how does it work?	Blocks sperm from entering the uterus and the spermicide damages sperm.
how much does it cost?	about $55 - $75 for the Lea Shield® and up to $25/tube for the spermicidal jelly
what are the advantages?	menstrual • can be used during menstruation; blocks menstrual flow from entering into vagina from uterus sexual, psychological • controlled by female cancers, tumors and masses: no data available other • can be purchased at a drug store without a prescription • one size fits all
what are the disadvantages and challenges?	menstrual: none sexual and psychological • you have to put it in before penis touches vagina, may interrupt foreplay

cancers, tumors and masses: no data available

other

- no protection from STDs

what can go wrong?

- may become dislodged if put in incorrectly

who tends to choose this method?

- females who can plan ahead when they will have sexual intercourse
- may be more effective for females beyond their teen years

how do you start using this method?

- discuss this method with your sex partner
- know how to get emergency birth control

what are the instructions?

1. purchase at a drug store
2. read the instructions that come with the Lea Shield® and the spermicidal jelly
3. practice using this method with a back up method of birth control (e.g. condoms) the first few times you use it to make sure you are using it successfully
4. coat the inside of the bowl 1/3 full with spermicidal jelly; do not fill the bowl
5. press the rims of each side of the bowl together with the thumb and index finger; while holding the device with the valve side down and the loop out, insert it all the way into the vagina, guiding it with the control loop; all the air behind the Lea Shield® must be removed in order to create the suction necessary to hold it in place; this can be done by squeezing the valve several times or by walking around for a minute
6. each time the male ejaculates, put more spermicide in the vagina using a spermicide applicator tube - but don't remove the Lea Shield®
7. leave the Lea Shield® in place for at least 8 hours after the last episode of sexual intercourse

Lea Shield®

8. to remove, grasp the control loop and gently twist it to break the suction, and then pull it out slowly
9. you can leave the Lea Shield® in up to 48 hours according to the company that makes it, but Planned Parenthood of British Columbia recommends it be removed no more than 24 hours after you put it in to reduce the risk of toxic shock syndrome
10. after you take the Lea Shield® out, clean, rinse, dry and store in a cool, clean, dry, dark place

what kind of problems are there when you use this method and what do you do about them?

may increase risk of infection of urinary tract

- see your health care provider

may increase risk of toxic shock syndrome

- don't leave Lea Shield® in vagina for longer than 24 hours

how soon after you stop using this method can you get pregnant?

- it's possible to get pregnant right away after you stop using the Lea Shield®

Lunelle®

method name

■ **LUNELLE®** (combined injectable contraceptive)
(not available in Canada at time of printing this document, but may soon be available to Canadian females)

description

An injection / shot of an estrogen and a progestin that a female gets once a month (estrogen and progestin are hormones; hormones are chemicals that affect how our body functions):

failure rate - chances of getting pregnant the first year a couple uses this method

0.3%

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

almost 0%

how does it work?

- prevents eggs from being released by the female's ovaries
- makes the lining of the uterus thin and not ready to receive a fertilized egg

how much does it cost?

price unknown since not yet available

what are the advantages?

menstrual

- compared to Depo-Provera®, more regular bleeding pattern and female maintains normal estrogen levels

sexual, psychological

- don't have to worry about birth control at the time you're having sexual intercourse
- more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely

Lunelle®

cancers, tumors and masses
- no long term data available

other
- only have to remember once / month
- privacy: no one has to know you are using this method

what are the disadvantages and challenges?

menstrual
- often causes unwanted menstrual cycle changes and irregular bleeding, especially during the first year you use it
- menstrual cycle changes are less than for Depo-Provera

sexual, psychological
- female may fear repeated injections

cancers, tumors and masses
- no long term data available

other
- no STD protection
- must return every month for injection (difficult for some females)
- not ideal for females who are breast-feeding

who tends to choose this method?

- females who want effective birth control AND who can return for injection every month
- females who have difficulty remembering to take a birth control pill every day and who prefer a birth control method that is not necessary to remember during the time of the sexual act

how soon after you stop using this method can you get pregnant?

- the *average* delay users have from the time they stop using it to when they can get pregnant is 3 months

mini-pill

method name

MINI-PILL (progestin only pill)

description

A pill that a female swallows once every day at the same time of day. The pills contain a single progestin hormone (a hormone is a chemical that affects how our bodies function). Most mini-pills come in monthly packs of 28 pills.

failure rate - chances of getting pregnant the first year a couple uses this method

5%

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

0.7%

how does it work?

- prevents eggs from being released by the female's ovaries in about 50% of menstrual cycles
- makes it difficult for sperm and / or an egg to move through the female's reproductive system
- makes the lining of the uterus thin and not ready to receive a fertilized egg

how much does it cost?

about $15-$30 per pack (one month supply). Free if you're status First Nation.

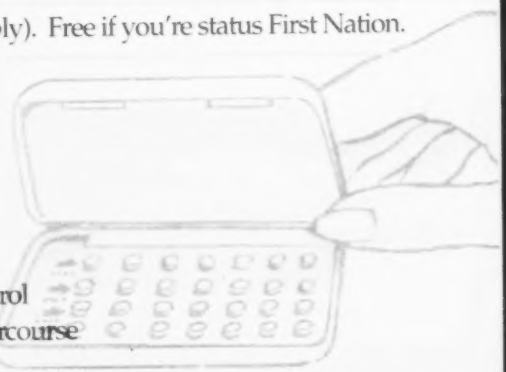
what are the advantages?

menstrual

- less menstrual cramps and pain
- less pain around the time an egg is released from your ovaries
- less menstrual blood loss

sexual, psychological

- don't have to worry about birth control at the time you're having sexual intercourse



mini-pill

- more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely

cancers, tumors and masses

- possible protection against cancer of the ovaries and the endometrium

other

- good option for breast feeding mothers
- doesn't contain estrogen, therefore less hormones
- is safer than the combined pill for females who are at high risk of a harmful blood clot
- easy to understand, since no hormone free interval
- it doesn't make you feel as sick as the combined pill
- causes less headaches than the combined pill

what are the disadvantages and challenges?

menstrual

- irregular bleeding leading to more days of menstrual bleeding (but less blood loss)
- missed periods or hardly any bleeding

sexual, psychological

- if you're depressed you might feel sadder, but usually depression is reduced when you're on the mini-pill
- mood changes, fatigue, anxiety

cancers, tumors and masses

- possible development of harmless cysts on your ovaries

other

- no STD protection
- possible change in appetite

what can go wrong?

- allergic reactions to certain progestins is possible but very rare
- breastfeeding gestational diabetes may occur: discuss diabetes with your health care provider if you are breast feeding

mini-pill

47

who tends to choose this method?

- females who can remember to take a pill every day at the same time
- females who smoke
- breastfeeding mothers
- females who want to avoid estrogen
- females who have severe headaches

how do you start using this method?

- visit your health care provider; he or she will be able to prescribe the mini-pills to you and give you more information about this method
- know how to get emergency birth control in case you forget to take your mini-pills

what are the instructions?

- take one mini-pill at the same time each day
- it's a good idea to take the mini-pill at the same time you do something else at the same time every day (e.g. brushing your teeth before you go to bed, eating your breakfast)

what kinds of problems are there when you use this method and what do you do about them?

missed pills:
if you are more than 3 hours late taking your mini-pill and you have had sexual intercourse in the past seven days:

1. contact your health care provider ***as soon as possible*** to discuss emergency birth control; AND
2. continue taking your mini-pills until the end of the package; AND
3. begin a new package of mini-pills on schedule

If you missed or were late taking your mini-pill(s) but have NOT had sexual intercourse in the last seven days, resume taking your mini-pills right away and use a back up method of birth control (e.g. condoms) for the next seven days

If you've missed pills and you're worried about getting pregnant, contact your health care provider as soon as possible to discuss emergency birth control

mini-pill

your period doesn't come

- see your health care provider for a pregnancy test
- about 10% of females stop having their period when they use the mini-pill; this is not harmful

your bleeding is irregular

- this is not unusual; if you think the bleeding might be from an STD infection, see your health care provider; ibuprofen may help reduce any pain

heavy bleeding

- try taking ibuprofen, discuss with your health care provider

stomach / abdominal pain that occurs often or that doesn't go away

- see your health care provider

severe headaches

- see your health care provider as soon as possible

how soon after you stop using this method can you get pregnant?

- it's possible to get pregnant right away after you stop using the mini-pill

natural family planning and fertility awareness

method name

NATURAL FAMILY PLANNING AND FERTILITY AWARENESS

description

Using physical signs, symptoms and menstrual cycle timing to figure out when an egg will be released. Includes:

- calendar method
- cervical mucus method
- basal body temperature method
- symptothermal method (a combination of at least 2 of the above methods)

In ***natural family planning***, couple uses abstinence during the days around the release of the egg.

In the ***fertility awareness method,*** couple uses a barrier method (e.g. condoms) during the days around the release of the egg.

failure rate - chances of getting pregnant the first year a couple uses this method

20%*

* natural family planning method when calendar, cervical mucus and basal body methods are used together

* failure rate for fertility awareness method is slightly higher

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

2.8%*

* when calendar, cervical mucus and basal body methods are used together **WITH** condoms

how does it work?

Sperm cells cannot contact the egg because the penis is not in or around vagina around days when egg is released. If fertility awareness is used, barrier (condom, spermicide, etc.) prevents contact between egg and sperm during fertile days.

how much does it cost?

cost of barrier method (if used), thermometer and note paper

natural family planning and fertility awareness

what are the advantages?

menstrual

- helps female learn more about her body
- no hormone side effects

sexual, physiological

- chance for female and male to work together, can improve communication

cancers, tumors, masses: none

other

- may be only method acceptable to couples for cultural or religious reasons
- helps couples achieve a pregnancy when practice is reversed

what are the disadvantages and challenges?

menstrual

- best for females with regular, easy to predict menstrual cycles
- difficult to use in early teens, near menopause and shortly after giving birth when cycles tend to be irregular

sexual, psychological

- requires 1-12 months of gathering information on timing of menstrual cycle, this may mean abstinence during this time or use of a barrier method (e.g. condom)
- can't have sex any time before ovulation if only using the basal body temperature method
- you need disciple and good communication skills
- in natural family planning, can't have sex around time of ovulation, which is time when females tend to have strongest sex drive (libido)

cancers, tumors and masses: none

other

- may be less accurate during times of stress
- easy to get pregnant if you don't use method properly
- does not protect against STDs

natural family planning and fertility awareness

what can go wrong?

- nothing probably; no increased risk of birth defects, spontaneous abortion or genetic abnormalities if conception occurs by accident

who tends to choose this method?

- females and couples with cultural beliefs that don't approve of other methods
- highly motivated couples who are willing to commit to abstinence or to using a barrier method during time of month when egg is released
- this method is not ideal for teens until the female's menstrual cycle is established and regular

how do you start using this method?

- collect at least 6 months of information on your menstrual cycle
- discuss this method with your health care provider, they will give you tips on how to use the method effectively

what are the instructions?

CALENDAR METHOD

- record the length of each menstrual cycle for at least 6 months
- assume sperm can survive 2-3 days and an egg gets released from your ovaries 14 days before your next period
- as a reference point, assume that the first day of your menstrual period is day 1
- to figure out which day to **BEGIN** abstaining from sexual intercourse, subtract 18 from the number of days that were in the shortest cycle you recorded in the last 6 months (e.g. if your shortest cycle was 28 days long, 28-18=10, therefore **BEGIN** abstaining on day 10 of your cycle)
- to figure out the day when you can **RESUME** having sexual intercourse, subtract 11 from the number of days in the longest cycle you recorded in the last 6 months (e.g. if your longest cycle was 31 days long, 31-11=20, therefore you can **RESUME** having sexual intercourse 20 days after day 1 of your period)

natural family planning and fertility awareness

CERVICAL MUCUS METHOD

the female checks the amount and the characteristics of the mucus near the outside of the vagina (vulva) each day

- once menstrual bleeding has finished, there is not a lot of mucus
- before the egg is released, mucus is cloudy, yellow or white and sticky
- around the time the egg is released, mucus is thick, slippery and clear (it's possible to get pregnant at this time of the cycle)
- shortly after the egg has been released, mucus is thick, cloudy and sticky (it's possible to get pregnant at this time of the cycle)
- well after the egg has been released, there is very little mucus
  if you have sexual intercourse before the egg is released, the semen from the male will make it hard for you to tell if the mucus you detect is from your body or from the male during the first 24 hours after sex

BASAL BODY TEMPERATURE METHOD

- body temperature increases just before the egg is released and stays high until the beginning of your next period
- take your body temperature every morning before getting out of bed (in your mouth, in your anus or in your vagina - the same spot each day), record your temperature on a calendar
- assume that it may be possible for you to get pregnant from the time just after your menstrual period stops until your temperature has gone up and remained up for at least 3 days in a row if your cycles are no less than 25 days in length
- if you cycles are less than 25 days in length, assume that it may be possible for you to get pregnant from the time when your period begins until your temperature has gone up and remained up for at least 3 days in a row

natural family planning and fertility awareness

what kinds of problems are there when you use this method and what do you do about them?

how soon after you stop using this method can you get pregnant?

SYMPTOTHERMAL METHOD

- combines at least 2 of the above methods
- may also include change in sex drive, change in the feel of your cervix, the position of your cervix and how wide the cervix is open
- before ovulation, the cervix is softer, more moist and slightly open
- after ovulation, the cervix drops and becomes firm and closes

some people don't use this method consistently

- make sure you know how to access emergency birth control
- discuss problems you are having with your sex partner

- immediately; natural family planning can help you get pregnant because you can choose to have sexual intercourse during the fertile time of cycle

natural family planning and fertility awareness

You can get a free pad of natural family planning calendars by calling Yukon Communicable Disease Control at 1-800-661-0507. Be sure to indicate if you want the temperature to be in Farenheit or Celsius.

You can also photocopy these tables to make your own record sheets.

Photocopy this page on one side of each record sheet and photocopy either the Farenheit or Celsius chart on the other.

Chart Number

Date Previous cycle variation

Cycle variation based on recorded cycles. This cycle: days.

Usual time you took your temperature

Did you take your temperature: by mouth by vagina by anus

Mucus:
P = peak mucus symptom
D = dryness on external labia
W = wetness on external labia

Consistency:
m = ordinary - no particular consistency
t = tacky
s = smooth, slippery, stretchy
Stretch: in inches
Quantity: 0, +, ++, +++
Color: C = clear, O = opaque, Y = yellow

Peak day refers to the last day of the more fertile type of mucus before the drying-up process begins

Cervix: • = closed, O = open, F = firm, S = soft, L = low, H = high

DAYS OF CYCLE		01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
CHECK DAYS MENSTRUATION																																											
CHECK DAYS HAD SEX																																										
CHECK TEMP C°	37.4																																									
	37.3																																									
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	36.2																																									
DAY OF CYCLE		01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
MUCUS: WET-DRY CONSISTENCY, COLOR																																										
PEAK OR LAST DAY																																										
CERVIX: OPEN-CLOSED, FIRM-SOFT, LOW-HIGH																																										

natural family planning and fertility awareness

DAYS OF CYCLE		01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
CHECK DAYS MENSTRUATION																																										
CHECK DAYS HAD SEX																																										
CHECK TEMP F°	99.0																																									
	98.8																																									
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DAY OF CYCLE		01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41
MUCUS: WET-DRY CONSISTENCY, COLOR																																										
PEAK OR LAST DAY																																										
CERVIX: OPEN-CLOSED, FIRM-SOFT, LOW-HIGH																																										

1 877 957 8953

Norplant® implant system

method name

NORPLANT® IMPLANT SYSTEM

description

6 soft plastic capsules (34mm long x 2.4 mm in diameter); the capsules contain a progestin hormone (a hormone is a chemical that affects how our bodies function). The capsules are surgically inserted into the female's arm by a health care provider.

failure rate - chances of getting pregnant the first year a couple uses this method

0.05%

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

almost 0%

how does it work?

- makes if difficult for sperm and / or an egg to move through the female's reproductive system
- makes the lining of the uterus thin and not ready to receive a fertilized egg
- prevents eggs from being released by the female's ovaries

how much does it cost?

about $450 (lasts for 5 years, average cost if left in 5 years = $7.50 / month)

what are the advantages?

menstrual

- less menstrual blood loss
- less menstrual cramps and pain
- less pain around the time an egg is released from your ovaries

sexual, psychological

- don't have to worry about birth control at the time you're having sexual intercourse

Norplant® implant system

- more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely
- depression from pre-menstrual syndrome may decrease

cancers, tumors and masses

- risk of endometrial and ovarian cancer may be decreased

other

- only have to remember it once every 5 years
- decrease in anemia
- headaches: certain headaches may be less painful
- extremely low dose of progestin and no estrogen

what are the disadvantages and challenges?

menstrual

- irregular bleeding, no menstrual blood loss (amenorrhea), spotting
- ovaries get larger; usually return to normal size once you stop using Norplant®

sexual, psychological

- mood changes, depression, anxiety

cancers, tumors and masses: none

other

- no STD protection
- you have to go to a health care provider to get it taken out
- headaches may become worse
- breasts may feel tender/sore
- may cause acne or make acne worse
- weight gain: 5 pounds in 5 years on average
- you may be able to see the Norplant® under the skin
- pain when it's put in your arm and pain when it's taken out
- possible hair growth or loss

Norplant® implant system

what can go wrong?

- can be difficult to remove it from your arm
- severe headaches: see your health care provider if this continues
- severe weight gain (very, very rare)
- large, painful ovarian cysts; egg follicles, which may become as large as 5-7 cm usually go back to normal by themselves after Norplant® is removed
- infection where the Norplant® is put in: see your health care provider

who tends to choose this method?

- females who want long term birth control
- females who have difficulty remembering to take a birth control pill every day and who prefer a birth control method that is not necessary to remember during the time of the sexual act
- breast feeding mothers

how do you start using this method?

- visit your health care provider; he or she will be able to insert the Norplant® or refer you to a health care provider who can do this
- when you book an appointment, tell the person you are booking with that you are thinking about getting Norplant®

what are the instructions (after getting the Norplant® put in)?

- keep spot where Norplant® was put in dry for the first 4 days
- use another birth control method for the first few days on Norplant®, your health care provider will tell you how many days
- expect irregular vaginal bleeding; if your pattern of bleeding is unacceptable to you, go back to your health care provider, he or she will be able to suggest things to improve the bleeding pattern
- make sure you know where to go to get Norplant® taken out, **REMEMBER, IT'S YOUR CHOICE IF AND WHEN TO HAVE Norplant® REMOVED**
- see your health care provider if you have:

1. pain in your lower stomach / abdomen
2. very heavy menstrual bleeding
3. arm pain

Norplant® implant system

4. pus, redness, heat or bleeding where Norplant® was put in
5. severe headaches
6. if you think you may be pregnant

- if 5 years is up and you want a new Norplant®, you can have the old capsules taken out and new ones put in at the same time

what kinds of problems are there when you use this method and what do you do about them?

menstrual changes

- to be expected, if bothersome see your health care provider

weight gain

- exercise and eat healthy foods

irregular and / or heavy bleeding

- if problem is unacceptable to you see your health care provider

no menstrual bleeding (amenorrhea)

- this is common among Norplant® users and is not harmful, check with your health care provider if you think you may be pregnant

pain in your stomach / abdomen

- if the pain stays for a long time or keeps coming back see your health care provider

pain after getting the Norplant® put in

- make sure the bandage is not too tight, try an ice pack for 24 hours, avoid pressing on the implants, try taking aspirin or ibuprofen

infection at site of Norplant®

- contact your health care provider

breast tenderness / soreness

- contact your health care provider

severe headaches

- contact your health care provider

severe acne

- consider getting the implants removed

Norplant® implant system

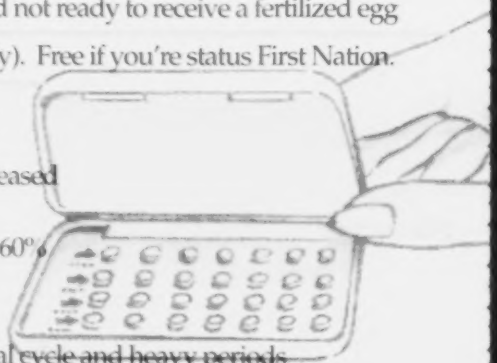
6

how soon after you stop using this method can you get pregnant?

- usually possible to get pregnant as soon as Norplant® is removed

the pill

method name	■ **THE PILL** (combined estrogen/progestin oral contraceptives)
description	A pill that a female swallows once every day around the same time of day. The pills contain 2 hormones: an estrogen and progestin (hormones are chemicals that affect how our bodies function). Most pills come in monthly packs of 28 pills: the first 21 pills contain hormones, the remaining 7 pills don't contain hormones. You take the last 7 pills to stay in the habit of taking one pill a day.
failure rate - chances of getting pregnant the first year a couple uses this method	5%
failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods	0.7%
how does it work?	• prevents eggs from being released by the female's ovaries • makes it difficult for sperm and / or an egg to move through the female's reproductive system • makes the lining of the uterus thin and not ready to receive a fertilized egg
how much does it cost?	about $15-$30 per pack (one month supply). Free if you're status First Nation.
what are the advantages?	menstrual • less menstrual cramps and pain • less pain around the time an egg is released from your ovaries (ovulation) • less menstrual blood loss (decrease of 60% or more) therefore, less anemia • less spotting • can be used to treat irregular menstrual cycle and heavy periods



- can be used to help control the menstrual cycle (e.g. plan so there is no bleeding on vacations, school exams)
- can decrease the number of menstrual cycles; you can take 3 series of 21 active pills followed by pill-free interval of 4 days
- may reduce pre-menstrual syndrome, depression, pain / symptoms from endometriosis and sever headaches

sexual, psychological

- don't have to worry about birth control at the time you're having sexual intercourse
- more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely

cancers, tumors and masses

- for every 100,000 females, 44 fewer users of the pill will get cancers in their reproductive tract in their lifetime than non-users of the pill
- ***cancer of the ovaries:*** decreased risk for pill users
- ***cancer of the lining of the uterus*** (endometrial cancer): decreased risk for pill users
- ***cancer of the colon / rectum*** (last part of digestive tract and bum hole): decreased risk for pill users

other

- reduces risk of pregnancy in the fallopian tubes (ectopic pregnancy)
- reduces acne
- reduces facial hair, reduces male-like physical sex characteristics (hirsutism)

what are the disadvantages and challenges?

menstrual

- spotting, especially during the first few menstrual cycles that you are on the pill
- more spotting in females who smoke

sexual, psychological

- can increase depression, moodiness, fatigue or mood changes
- may decrease sex drive (libido)

cancers, tumors and masses

- ***breast cancer:*** best evidence is that females in teens or early 20's who have never had children who are on the pill are slightly more likely to be diagnosed with breast cancer: may be because the pill speeds up development of existing cancerous cells in breasts, or because these females may be screened for breast cancer more often; females aged 45 or older, previous or current pill users and females who have not taken the pill for 10 or more years are at no increased risk of breast cancer
- ***cervical cancer:*** may increase risk of cancer of cervix; the increased cancer risk may be due not to the pill but to other risk factors such as age of first sexual intercourse, number of sex partners, number of pap tests, etc.

other

- no STD protection
- feeling sick you stomach or throwing up, especially during the first few months on the pill
- increased breast size, increased breast tenderness / soreness
- increased appetite (weight gain not common with low hormone dose pills)
- headaches
- increased high blood pressure (hypertension)

what can go wrong?

- blood clotting, rarely causing death (deep vein thrombosis or pulmonary embolism); increased risk of death to pill users is about 1 death out of one million pill users per year - the most modern pills that contain less hormones may not carry this risk

who tends to choose this method?

- females who can remember to take a pill every day
- females who want to gain the benefits of the pills (e.g. decreased pain, regular cycles, decreased acne, etc.)
- females who are under age 35 even if they smoke
- females who are 35 year or older if they don't smoke
- females who are 35 years old and smoke less than 20 cigarettes a day, ***but only under the advice of their health care provider*** - the smoking, not the pill, is the main health risk, goal for female should be to try to reduce / stop smoking - consider other birth control method

how do you start using this method?

- visit your health care provider; he or she will be able to prescribe you the pills and give you more information about this method
- know how to get emergency birth control in case you forget to take your pills

what are the instructions?

- take one pill at the same time each day
- it's a good idea to take the pill at the same time you do something else at the same time every day (e.g. brushing your teeth before you go to bed, eating your breakfast)

what kinds of problems are there when you use this method and what do you do about them?

missed pills:

- if one pill is missed, you should take it as soon as you remember; this may mean taking two pills in one day
- if you miss two pills in a row ***during the first two weeks of the pack,*** you should take two pills on the day you remember and two on the following day; you should use a back-up method of birth control until you have taken pills for seven days in a row
- if you miss two pills in a row ***in the third week of the pack,*** throw out the remainder of the pack and start a new pack on the day you remember; you may not have a period this month

- if you miss three pills in a row during the first three weeks of the pack, throw out the remainder of the pack and start a new pack on the day you remember; you should use a back-up method of birth control if you have sex in the first seven days of the new pack; you may not have a period this month; if you have had sexual intercourse in the last 7 days you should get emergency birth control immediately
- don't worry if you have missed pills in the last week of the pack, but DO remember to start your new pack on schedule
- *if you've missed pills and you're worried about getting pregnant, contact your health care provider as soon as possible to discuss emergency birth control*

feeling sick to your stomach (nausea)

- nausea usually gets reduced after you've been on the pill for a few months
- try taking your pill when you eat a meal or at bedtime
- talk to your health care provider about taking a pill that has less hormones

spotting and / or breakthrough bleeding

- spotting and breakthrough bleeding usually get reduced and often go away after you've been on the pill for a few months
- remember to take your pill at the same time each day
- talk to your health care provider about taking a pill that has a slightly higher amount of hormones

headaches

- talk to your health care provider as soon as possible

hot flashes during last week on pill pack (hormone free week)

- talk to your health care provider about this

how soon after you stop using this method can you get pregnant?

- there may be a delay from the time you stop using the pill to the time when you can become pregnant (in one study, 90% of users were pregnant within 24 months after stopping)
- pregnancy may occur during the first cycle after you stop taking the pills

spermicides

method name

SPERMICIDES

description

A cream, gel, film, foam, suppository or pill placed inside the vagina; the product usually contains either nonoxynol-9 or octoxynol-9 which damage sperm cells.

failure rate - chances of getting pregnant the first year a couple uses this method

26%

failure rate when used with male condom chances of getting pregnant the first year a couple uses these methods

3.64%

how does it work?

- makes it difficult for sperm cells to enter the female's uterus
- attacks sperm cells, which makes it difficult or impossible for sperm cells to move into and through the female's uterus

how much does it cost?

Depending on the product and amount you buy, from about $8 to $25.

what are the advantages?

menstrual

- none

sexual, psychological

- possible increased lubrication
- easy to put in just before or during sexual intercourse
- either partner can buy it and put it in the female's vagina
- can be used by female without male partner knowing

cancers, tumors and masses

- possible decrease in transmission of the human papilloma virus which is thought to be a cause of cervical cancer

other
- if you don't have sex often it can be a good method
- you can use it when breastfeeding

what are the disadvantages and challenges?

menstrual
- none

sexual, psychological
- must feel comfortable putting the spermicide into the vagina
- some spermicides like foam and creams are messy
- may cause irritation to vagina, anus or mouth
- unpleasant taste

other
- allergic reaction possible
- there is concern that use of nonoxynol-9 may make it easier for the virus that causes AIDS to pass from one person to another, especially when nonoxynol-9 is used very often

what can go wrong?

Ensure that if you are using a diaphragm or cervical cap with jelly, that you use spermicidal jelly (not food jelly).

who tends to choose this method?

- anyone who does not have an allergy to spermicide ingredients

how do you start using this method?

- female or couple decides to use it; you can begin this method any time
- know where you can get emergency birth control

what are the instructions?

1. check the expiry date
2. wash your hands
3. apply spermicide according to product instructions
4. place spermicide as near as possible to cervix
5. water exposure (bathing or douching) in the 6 hours following sex may reduce the effectiveness of the spermicide
6. store the spermicide in a cool, dry location

spermicides

what kinds of problems are there when you use this method and what do you do about them?

skin irritation

- the irritated skin may increase chances of STD transmission
- if skin irritation occurs another birth control method is recommended

how soon after you stop using this method can you get pregnant?

it's possible to get pregnant right away after you stop using spermicides

method name

■ **SPONGE** (e.g. Protectaid® Sponge)

description

A sponge containing a spermicide gel; the sponge is placed in the vagina near the cervix.

failure rate - chances of getting pregnant the first year a couple uses this method

20%

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

2.8%

how does it work?

- penis contacting sponge during sexual intercourse puts pressure on the sponge - the pressure pushes out the spermicide gel contained in the sponge, the spermicide damages sperm cells
- prevents sperm from entering the uterus by begin a physical barrier between the vagina and uterus

how much does it cost?

about $10-$12 dollars for a package of 4 sponges

what are the advantages?

menstrual: none

sexual, psychological

- can be left in vagina for up to 12 hours after sexual intercourse

cancers, tumors and masses: none

other

- may reduce chance of cervical STD infection
- relatively easy to put in and take out
- you can buy it in a drug store

sponge

what are the disadvantages and challenges?

menstrual: none

sexual, psychological

- putting it in just before sex may interrupt foreplay
- can't have sex after 6 hours after putting it in (e.g. if you think you are going to have sexual intercourse at 9PM and to plan in advance, you put in a sponge at 5PM, if you don't have sex until 11:00PM you would have to remove the sponge you put in and put in a new sponge)

cancers, tumors and masses: none

other

- does not offer reliable STD protection

what can go wrong?

- may be difficult to tell the difference between the sponge and the wall of the vagina when you remove it: be careful when you remove it

who tends to choose this method?

- females who are breast feeding as long as their vagina and cervix have returned to a "non-pregnant" shape
- females who can plan ahead when they will probably have sexual intercourse
- may be more effective for females who are beyond their teen years

how do you start using this method?

- practice putting it in the vagina before you use it the first time
- know how to get emergency birth control

what are the instructions?

1. grasp the sponge by putting your index (pointing) finger into one of the slots
2. get in a squatting position or lie on your back with your knees lifted up against your chest
3. use your index finger to push the sponge as deep as possible inside your vagina - it's best to push it all the way in against your cervix
4. you can have sexual intercourse more than once during the first six hours you have the sponge in - you don't have to add spermicide cream or jelly

5. you have to leave the sponge in for at least 6 hours after sexual intercourse - don't leave the sponge in your vagina for more than 12 hours total at a time
6. to remove the sponge, get in a squatting position or on your back
7. put your index finger into your vagina and reach up to find one of the slots you used to put the sponge in
8. once you have got your index finger in one of the slots, gently pull the sponge out

what kinds of problems are there when you use this method and what do you do about them?

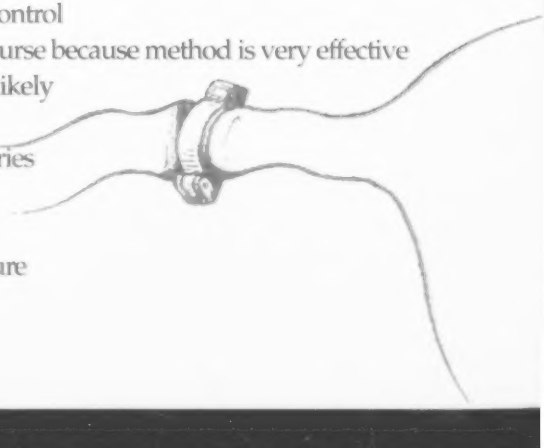
- no serious side effects have been found
- it's probably a good idea to pee after having sexual intercourse
- talk to your health care provider if you feel any pain or discomfort during or after using the sponge

how soon after you stop using this method can you get pregnant?

- it's possible to get pregnant right away after you stop using the sponge

sterilization of female

method name	■ **STERLIZATION OF FEMALE** (tubal litigation)
description	An operation (surgery) to cut or block the female's fallopian tubes.
failure rate - chances of getting pregnant the first year a couple uses this method	0.4%
failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods	almost 0%
how does it work?	The fallopian tubes cannot carry eggs to the uterus where pregnancy occurs (medical pregnancy defined as the attachment of a fertilized egg to the lining of the uterus)
how much does it cost?	free
what are the advantages?	menstrual: none sexual, psychological • don't have to worry about birth control • more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely cancers, tumors and masses • protects against cancer of the ovaries other • permanent birth control method • relatively simple surgical procedure



sterilization of female

what are the disadvantages and challenges?

menstrual

- possible changes in menstrual pattern - "post-tubal litigation syndrome"

sexual, psychological

- regret may occur, especially among females who choose sterilization when they are under 30 years old

cancers, tumors and masses: none

other

- no STD protection
- if pregnancy occurs, high chance of ectopic pregnancy (pregnancy in a fallopian tube rather than in the uterus)
- should be considered a permanent, irreversible method

what can go wrong?

- infection after surgery: see your health care provider
- serious bleeding after surgery: see your health care provider
- death: 1-2 / 100,000 procedures, caused by the medicine (general anesthesia) to put you to sleep during the surgery

who tends to choose this method?

- females who are certain they don't want to have more children
- females that have a medical condition that makes pregnancy dangerous

how do you start using this method?

- visit your health care provider; he or she will be able to refer you to a health care provider who can perform this operation
- make sure you have thought carefully about this method before going through with it

what are the instructions?

- your health care provider will discuss the surgery and follow-up with you

what kinds of problems are there when you use this method and what do you do about them?

regret

- consider sterilization carefully before getting the surgery

menstrual cycle disturbances

- contact you health care provider

sterilization of female

how soon after you stop using this method can you get pregnant?

- females should assume that this is a permanent method
- reversing the method is very difficult and success depends largely on the sterilization method used

sterilization of male

method name

■ **STERLIZATION OF MALE** (vasectomy)

description

An operation (surgery) to cut or block the male's vas deferens.

failure rate - chances of getting pregnant the first year a couple uses this method

0.1%

failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods

almost 0%

how does it work?

Sperm cannot enter the semen fluid, so when a man ejaculates / has an orgasm and semen comes out of his penis, there is no sperm mixed in.

how much does it cost?

free

what are the advantages?

menstrual: none

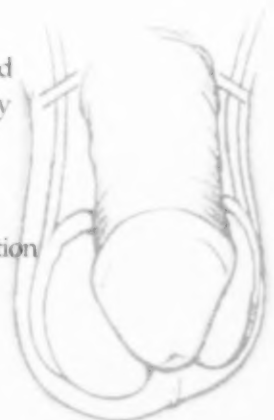
sexual, psychological

- don't have to worry about birth control
- more enjoyment of sexual intercourse because method is very effective and unintended pregnancy is unlikely
- female doesn't have to worry about birth control

cancers, tumors and masses: none

other

- simpler, safer and more effective than female sterilization
- permanent



sterilization of male

what are the disadvantages and challenges?

menstrual: none

sexual, psychological

- regret

cancers, tumors and masses

- weak association of male sterilization and increased risk of prostate cancer

other

- no STD protection
- short term pain, swelling after the operation

what can go wrong?

- bleeding near incision site (uncommon)
- blood clots in scrotum

who tends to choose this method?

- males who are certain they don't want to have any more children
- males who have a partner for whom pregnancy would be a medical risk

how do you start using this method?

- visit your health care provider; he or she will be able to refer you to a health care provider who can perform this operation
- make sure you have thought carefully about this method before going through with it

what are the instructions?

before surgery:

- your health care provider will discuss the surgery and follow-up with you

after surgery your health care provider will have more detailed instructions for you, but here are some tips:

- keep incision clean
- put ice on scrotum for 4 hours after surgery
- rest for 2 days
- wear snug underwear and pants

- you may begin having sexual intercourse 2-3 days after the operation
- use another birth control method or don't have sex for the first 20 ejaculations or for the first 3 months after the operation

what kinds of problems are there when you use this method and what do you do about them?

- regret: consider sterilization carefully before getting the surgery
- wound infection: see your health care provider
- pain at incision site: see your health care provider
- a large amount of swelling of scrotum: contact your health care provider

how soon after you stop using this method can you get pregnant?

- males should assume that this is a permanent method
- reversing male sterilization may be possible but difficult

withdrawal

method name	**WITHDRAWAL**
description	Male pulls his penis out of the vagina before ejaculation ("orgasm" when a large amount of sperm cells come out of his penis).
failure rate - chances of getting pregnant the first year a couple uses this method	19%
failure rate when used with male condom - chances of getting pregnant the first year a couple uses these methods	2.7%
how does it work?	Pulling penis out of vagina before ejaculation reduces the chance that sperm cells will enter the vagina and travel into the fallopian tubes, therefore an egg is unlikely to get fertilized.
how much does it cost?	free
what are the advantages?	menstrual: none sexual, psychological • always available as a birth control method • encourages male involvement in birth control cancers, tumors and masses: none other • surprisingly effective if used correctly
what are the disadvantages and challenges?	menstrual: none sexual, psychological • the male has to cooperate and has to be able to pull out on time

- may reduce the pleasure for male and female: male cannot ejaculate inside vagina, female may be worrying about if the male will remember to pull out

cancers, tumors and masses: none

other

- does not offer STD protection

what can go wrong?

- male may not pull out on time

who tends to choose this method?

- couples who can talk to each other about sex
- couples in a stable relationship - no multiple sex partners, no sleeping around
- people who do not have an STD

how do you start using this method?

- male and female agree in advance on method
- know how to get emergency birth control

what are the instructions?

- practice withdrawal by having sexual intercourse and using a back up method (e.g. condoms) so the male is sure he can pull out on time
- wipe the penis clean of the pre-ejaculation fluid that comes out during sexual arousal **BEFORE** putting penis in vagina
- it is recommended to use sex positions that reduce the deepness of the penis penetration in the vagina

what kinds of problems are there when you use this method and what do you do about them?

failure to withdraw

- get emergency birth control

how soon after you stop using this method can you get pregnant?

- it's possible to get pregnant right away after you stop using withdrawal

pregnancy options

AM I PREGNANT?

If you think you may be pregnant, it's important to talk about what you're going through with someone you trust.

how can I tell if I may be pregnant?

- you may be pregnant if you have had sexual intercourse in the last little while and your period or menstrual bleeding is late or your menstrual bleeding is much lighter than usual

Just because your period is late doesn't mean you are pregnant, lots of other things can cause your period to be late.

Other signs of being pregnant include:

1. feeling sick to your stomach
2. feeling more tired
3. feeling hungry more often
4. gaining weight
5. breasts feeling swollen

Remember though, you can feel all of these signs without being pregnant, and you can be pregnant and not feel any of these signs. Every female has a different experience.

what's a pregnancy test?

- a pregnancy test comes in a kit that tests for a certain hormone in your pee
- the hormone will only be in your pee if you are pregnant
- if you take the test in the first few days after the sexual intercourse that caused the pregnancy, the test will probably not work well
- for the test to work well, you have to wait until at least the first day of your missed period before you take it (in other words the day when you think your next period was supposed to start)
- the tests results are very accurate if you follow the instructions in the test kit
- the test only takes a few minutes to do

how can I get a pregnancy test?

- you can get one done for free at your doctor's clinic, nursing station, health centre or Yukon Communicable Disease Control
- you can buy one at your drug store - they cost about $10 - $15

If you buy the test kit at a drug store, make sure you:

1. follow the instructions in the kit
2. see a health care provider as soon as possible if you find out you're pregnant
3. see a health care provider if you are not sure about the test results
4. see a health care provider if the test results say that you are **NOT** pregnant, but your period still doesn't come

what are my options if I'm pregnant?

1. you can choose to continue with the pregnancy and keep the baby
2. you can choose to continue with the pregnancy and put the baby up for adoption or foster care
3. you can choose to get an abortion
4. if less than a week has passed since the time you had the sex that you think caused the pregnancy, emergency birth control may also be an option for you; (see page 5)

what if I think I'm pregnant but I don't know what to do?

It's important to talk to someone you trust, for example:

- parents or guardians
- health care providers
- friends
- teachers
- coaches
- church clergy

The Victoria Faulkner Women's Centre has counselors who can talk to you about your options by phone or in person (see page 131).

pregnancy options

KEEPING YOUR BABY

what if I want to continue with the pregnancy?

Visit a health care provider right away to have a check up. This will help make sure that you and your baby have the safest and healthiest pregnancy possible.

- your health care provider will set up a check up schedule with you
- regular check ups will help make sure everything goes ok during your pregnancy and will help you and your health care provider find out quickly if there are any problems during your pregnancy
- your health care provider will also keep you informed about all the programs, services and resources that are available to support you while you're pregnant and once the baby is born

ADOPTION AND FOSTER CARE

what if I'm considering adoption or foster care?

- it's still important to see your health care provider right away (please see the section above called "What if I want to continue with the pregnancy)

If you are considering adoption or foster care for your child, you can call Family and Children's Services (see page 131). Family and Children's Services is the government office that handles adoption and foster care. They will give you information about how adoption and foster care works to help you make *your* decision.

ABORTION

what if I'm considering abortion?

- contact your health care provider ***right away*** to set up a check up, tell the person who answers the phone that you need an appointment ***as soon as possible***
- keep in mind that abortion is an extremely safe procedure when done early in the pregnancy and abortion is still quite safe up to 16 weeks into the pregnancy

- after 16 weeks the procedure becomes more difficult
- it can be difficult to find a doctor to perform an abortion when the pregnancy is beyond 16 weeks

Remember, seeing a health care provider about an abortion doesn't mean you have to go through with the procedure, it just means you can talk in more detail about your options.

where does the abortion get done?

- if you are 12 weeks pregnant or less the abortion can normally be done in Whitehorse
- if you are more than 12 weeks pregnant the abortion is usually done down south, usually in Vancouver (your Yukon health care provider will help you set up your appointments down south)

how long does the abortion take if it's done in Whitehorse?

- the abortion is done in a few steps over 3 or 4 days
- if you are not living in Whitehorse you will need to spend at least 4 days in Whitehorse when you come in

if the abortion is done down south, how long will I have to go for?

- you should plan to stay at least a few days
- your health care provider in the Yukon will help you figure out exactly how long

how much does it cost to get an abortion?

- the doctor visits and the abortion procedure are free as long as you have lived in the Yukon for the last 3 months:
- if your abortion is in Whitehorse and you live outside of Whitehorse, your transportation costs to and from Whitehorse are free
- no matter where you live in the Yukon, if your abortion is in Vancouver then your transportation costs to and from Vancouver and your home community are free
- you have to arrange your travel with the Yukon Health Care Insurance Plan (see page 131) before you leave your home town for transportation to be free - just ask your local health care provider how this works

If you have not lived in the Yukon for at least 3 months, call the Yukon Health Care Insurance Plan (see page 131) or the Victoria Faulkner Women's Centre (see page 131) and they will help you find out about your medical coverage.

how do I make an appointment for an abortion?

- contact a doctor's clinic or your nursing station or health centre to set up an appointment
- clinic phone numbers and locations are listed on page 128 of this guide
- if there is no doctor in your community you can contact your nursing station or health centre and they will help you set up an appointment with a doctor
- you can also get help setting up an appointment by calling Yukon Communicable Disease Control toll free (see page 128)

PLANNING YOUR PREGNANCY

what are the advantages of planning a pregnancy?

- there are lots of things that females and couples can do to help ensure the baby is as healthy as possible (e.g. avoiding alcohol consumption, taking folic acid)
- when these certain health steps are taken **BEFORE** the pregnancy begins, the benefits to the baby are the greatest
- females have a chance to consider the health risk of pregnancy before becoming pregnant
- females and couples can ensure that the home environment where the baby develops is safe and nurturing

Here are some ideas if you are thinking about getting pregnant

tell your health care provider that you are planning to get pregnant

- this will give you the chance to discuss pre-pregnancy health
- if you have been pregnant before, you can discuss how your pregnancy went with your health care provider

eat nutritious foods, exercise and rest

- pregnancy is a normal, healthy part of life
- when a mother has good physical health the baby will be more likely to receive adequate nutrition and the mother will be better able to enjoy her pregnancy
- moderate exercise is considered safe during pregnancy

ensure you want to bring a baby into your family

- are you in an abusive relationship? see page 123 for information on abuse
- do you feel you can take care of a baby?

reduce, or better still, avoid exposure to alcohol, tobacco and drugs

- alcohol, tobacco and many drugs are harmful to the development of a baby
- it can also be a good idea to reduce caffeine intake (for example, reduce the amount of coffee you drink)

planning your pregnancy

- if you are using alcohol, tobacco or drugs, and/or if you think you have an addiction, try to get all the help and support possible to help you reduce or stop using these substances (before beginning a pregnancy or as soon as you find out you're pregnant). Sources of help are listed on page 130.

X-rays

- avoid x-rays that are taken of areas around your stomach

take folic acid, a prenatal vitamin

- start taking folic acid many months before you begin your pregnancy
- take about 0.4 mg of folic acid (folate) every day
- this will reduce the risk of neural tube defects such as spinal bifida

talk to your health care provider about all the medications you are taking

- this includes prescription drugs, non-prescription drugs and herbal remedies
- avoid mega-dosing on anything, including vitamins

make sure your immunizations are up to date

- check all your immunizations with your health care provider
- make sure you are immunized against rubella (German measles)
- talk to your doctor or nurse about chicken pox
- if your immunizations are not up to date, get them up to date at least 3 months before beginning your pregnancy

review you medical history and the medical history of your family members

- if either parent has a history of genetic diseases, genetic counseling may be helpful
- if you have any serious medical problems, discuss them with your health care provider before beginning your pregnancy
- find out if you have diabetes - if you have diabetes, taking proper care of yourself, especially in the early part of your pregnancy, will reduce the risk of birth defects
- your health care provider will also talk to you about tuberculosis, asthma, chronic high blood pressure, heart disease, seizure disorders, thromboembolic disease, autoimmune disorders and phenylketonuria

if you are taking birth control pills or using an IUD...

- stop taking your pills or have your IUD removed when you are ready to get pregnant
- wait for at least one full menstrual cycle once you stop using pills or the IUD before you try to get pregnant
- you can use condoms during the month between stopping the pill or IUD and trying to get pregnant

avoid getting a high body temperature

- higher than normal body temperature can increase the risk of abnormal fetal development
- do what you can do to avoid getting the flu
- don't go in the sauna or take hot tub baths
- avoid physical activity that is so intense that your body temperature goes up for a long time

keep track of your menstrual cycle dates

- write down the first day of your menstrual bleeding during the months before you get pregnant
- this will help your health care provider figure out when your due date is once you are pregnant
- knowing your due date will help know when to do certain tests during your pregnancy
- it will also help if you need to have labor induced or a C-Section

avoid exposure to sexually transmitted diseases - if you have an STD, get treatment

- infections like chlamydia, gonorrhea, herpes, HIV, Hepatitis B and syphilis can seriously harm the baby
- some of these infections can be cured before you get pregnant
- other STD infections can be treated to reduce the chance that you will pass them to your baby
- if you think you may have an STD, see a health care provider for STD testing

certain other things to avoid ...

- avoid being exposed to hazardous or toxic chemicals
- don't handle cat litter and don't get a new cat
- if you are handling soil outdoors, wear gloves
- avoid eating raw meat or fish
- avoid drinking unpasteurized milk

confirm your pregnancy early

- when you think you may be pregnant, have a pregnancy test and exam as soon as possible
- go for a check up within the first 2 weeks of a missed period if possible
- if you period is unusual or you have any pregnancy symptoms get a test right away
- for more information about pregnancy symptoms and pregnancy testing, turn to the section on Pregnancy Options, page 82.

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

GENERAL INFORMATION

what are STDs?

- STDs are certain infections that can be passed from one person to another by sexual contact
- the infections can be caused by a virus, bacteria or other kinds of microbes

what can happen to you if you have an STD?

- some STDs have mild to moderate symptoms - they may be a nuisance and embarrassing but will not seriously harm you
- some STDs, if not treated, can make it impossible for you to ever have children
- some STDs can make you very sick
- some STDs can cause death
- almost all people who have an STD feel emotionally hurt by the infection

how can STDs be passed from one person to another person?

1. If somebody has one or more STDs, they MAY give it to someone else:
- *if* they touch them in certain parts of the body AND an exchange of any kind of body fluid occurs (like an exchange of saliva or spit, any moisture or mucus from the vagina, sperm or fluid from the penis, or blood or any other fluid from anywhere on the body including the mouth and anus); or
- *if* dry skin to skin contact between genitals, mouth or anus occurs.

(Your skin is a terrific barrier against STDs. But it's possible for your skin to have tiny holes, openings or cuts. It is through these tiny (or not so tiny) holes, openings or cuts that an STD can enter your body.)

2. If you share injection drug needles, drug equipment, tattooing devices, body piercing devices with someone who has certain STDs you may get infected.
3. A mother who has certain STDs may infect her child during pregnancy, when the baby is being delivered or while breastfeeding.

Just keep in mind that there are many different STDs and each one is a little bit unique in the way it can pass from one person to another.

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

how can you tell if you have an STD?

- you can have an STD and not have any symptoms - in other words, you can't always tell if you have an STD
- sometimes the symptoms are so mild that you don't notice them or you didn't know that they were STD symptoms
- other times the symptoms come and go

Some common symptoms of STDs are:

- an ***unusual*** liquid coming out of your penis or vagina, especially a watery, mucusy, clear, grayish, yellowish or greenish liquid;
- pain or burning when you pee;
- tingling or itching in your penis or vagina
- redness around your penis, vagina or anus;
- unusual bleeding from your vagina (e.g. bleeding or spotting between your periods or after sex, changes in your menstrual bleeding);
- a sore, bumps or a rash around your penis, vagina or anus (certain STDs cause sores in these places and elsewhere on the body); and
- mild to severe pain around your vagina, penis, pelvic area (that's inside around the very bottom of your "stomach" area) or anus.

A fever or headache may also be an STD symptom.

how can I protect myself from getting an STD?

1. Condoms **REDUCE** the chances of STD transmission when they are used to avoid:

- exchange of any body fluids **AND**
- dry contact between genitals and between genitals and anus

Condoms do not offer 100% protection against STD transmission.

2. If you inject drugs or alcohol, if you use tattooing devices or body piercing devices, make sure you only use clean needles and you don't share needles and equipment (e.g. syringes, cotton balls, rinse water).

3. If you are pregnant or planning to get pregnant, speak to your health care provider about STD testing.

Here are some other ways of reducing your chances of getting an STD:
Remember that most people can usually make the choices listed below. It is also true that sometimes people are in dangerous situations where some of the ideas below may not be choices.

- if you have never had sex before, think about waiting until you are older to begin having sex
- when you have sex, make sure it's a choice you and your partner both feel ready for
- before you have sex with someone, think about going with them to a clinic so you both can get STD testing and counseling (a good rule of thumb is to use condoms for the first six months with a person - **PLUS** another form of birth control if you also want to avoid pregnancy - you and your partner both get an STD test before you start having sex and again after being together for six months - then you can begin to think about not using condoms)
- choose not to have many sex partners in your lifetime
- choose not to have sex with another person who has had sex with many other people
- choose to be in a relationship when you and the person you're with are not "sleeping around"
- choose not to have sex when you and / or the person you are having sex with is drunk or high
- avoid sharing needles for drugs, body piercing or tattooing
- choose to stick to safe places to lower your chances of being raped (for more information, see ***Rape and Abuse***, page 123.)

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

- if you are in a public place like a bar, never leave your drink unwatched when you get up to dance or go to the washroom, (there is a "date rape drug" that could be put in your drink while you are not watching it - the drug can make you pass out or lose awareness about what is happening around you)

Many Yukon people in their teens and twenties have said that when they drink alcohol and/or use certain drugs they find it harder to use condoms.

what if I think I may have an STD?

- go to a clinic to get an STD test (see below)

Remember that STD testing is free and confidential. No one will tell that you called or went in.

what happens when I go in a clinic for an STD test?

You can talk to your health care provider about what STD tests to get. Common tests include:

- for males and females, a blood test for syphilis, hepatitis B, hepatitis C and HIV (HIV is the virus that causes AIDS);
- for females, a test for chlamydia and gonorrhea by having a swab taken from their cervix - often a pap smear is done as well;
- for females, a swab for certain other STDs taken from inside their vagina;
- for males, a test for chlamydia by peeing in a cup, a test for gonorrhea by having a swab taken from the tip of their urethra - that's their pee hole.

The health care provider can also look for other STDs, like herpes and genital warts, by a visual inspection of your penis or vagina - they may also be able to do lab tests for these STDs.

Even if you're feeling really shy or nervous about getting tested, it's a good idea to go in to see the health care provider for more information.

what should I do if I've started going out with someone new?

- it's always a good idea to get STD testing with your sex partner or with someone who you think you may start having sex with

- go to the clinic with your partner so you both get tested and if necessary treated at the same time
- when you see the health care provider, they may think that you have little or no risk of having an STD, so they may not recommend certain tests

can STDs be cured?

Bacterial STDs

- STDs caused by bacteria can be cured by taking medicine the health care provider prescribes, but remember that your body can be permanently damaged by the harm the STD caused you if you wait too long to get treated
- chlamydia and gonorrhea are examples of curable STDs

Viral STDs

- STDs that are caused by viruses cannot be cured with medication
- if you find out you have an STD caused by a virus, your treatment will focus on managing the infection rather than curing it - your doctor or nurse will tell you what to do to treat the STD
- HIV, genital herpes and genital warts are examples of viral STDs that cannot be cured

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name	**BACTERIAL VAGINOSIS**
bacteria / virus / other	bacteria
how do you get it?	• this is a vaginitis, not really an STD • occurs when there is a decrease in the normal healthy bacteria in the vagina - this can allow harmful bacteria to grow - affects females • if a female keeps getting bacterial vaginosis her partner should get treated
symptoms	• foul or fishy smell from vagina, smell is worse after sex • irritation in vagina (rare) • a new or different watery gray discharge from the vagina
testing	swab from vagina
treatment	• curable • your doctor or nurse will give you antibiotic medication
other	Douching, that's spraying water and other "cleaning" agents into the vagina can lead to bacterial vaginosis.

name

CHLAMYDIA (Chlamydia trachomatis)

bacteria / virus / other

bacteria

transmission

- sexual contact (vaginal or anal sex)
- pregnant mothers can pass it to their babies causing the baby to have an infection in the eyes or lungs

symptoms

females:

- a new or different discharge from the vagina
- a burning feeling when peeing
- a pain in the lower abdomen (lower stomach area), sometimes with fever and chills
- pain during sex
- bleeding between periods
- bleeding after sex

males:

- a watery or milky drip from the penis
- an itchy feeling inside the penis
- a burning or tingling feeling when peeing
- pain or swelling in the testicles

males and females:

- may not notice any symptoms (especially females)
- may get swollen groin

testing

females: swab from the cervix
males: pee in a cup

(females who have had a hysterectomy can also do the test by peeing in a cup)

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

treatment

- chlamydia is curable
- take antibiotic medication as directed from your doctor or nurse
- ask your doctor or nurse when it's safe to start having sex again
- your doctor or nurse will talk to you about treatment for anyone you have had sex with

complications

females:

- you may get a pain in your abdomen or belly that never seems to go away
- the infection can spread to all your reproductive organs and cause PID (that's short for pelvic inflammatory disease)
- the infection may make it impossible for you to ever get pregnant, or if you do get pregnant, the fetus may grow in your fallopian tubes instead of your uterus
- infection in the liver

males:

- the long term effects of chlamydia infection to males are not well understood, but it is possible that male fertility is affected
- Reiter's Syndrome may occur: this causes arthritis, urethral and eye infection

other

Chlamydia is the most common reported STD in the Yukon

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name	**GONORRHEA (Neisseria gonorrhoeae)**
bacteria / virus / other	bacteria
transmission	mainly sexual contact: vaginal, anal, oral sex
symptoms	females: • a new or different discharge from the vagina • a burning feeling when peeing • pain in the lower abdomen (lower stomach area) • fever and chills • pain during sex • bleeding or spotting between periods • swollen groin males: • discharge from the penis, may be thick and yellow-green in color • burning feeling when peeing - can be mild burning but many males say it feels like peeing "razor blades" • pain or swelling in the testicles, swollen groin
testing	females and males: swab from vagina or penis
treatment	• gonorrhea is curable • take antibiotic medication as directed by your doctor or nurse • ask your doctor or nurse when it's safe to start having sex again • your doctor or nurse will talk to you about treatment for anyone you have had sex with
complications	females: • the infection can spread to all your reproductive organs and cause PID (that's short for pelvic inflammatory disease)

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

- the infection may make it impossible for you to ever get pregnant, if you get pregnant, the pregnancy may happen in your fallopian tubes rather than in your uterus
- may cause an abscess on the lower part of the vulva

males:

- the long term effects of gonorrhea infection to males are not well understood but male fertility may be affected
- may enter your blood steam and cause rash and joint pain - may also affect the liver

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name

HEPATITIS A

bacteria / virus / other

virus

transmission

- from feces (poop) to mouth - e.g. when people cooking food do not wash hands properly after using washroom
- by contaminated household food
- sexual contact, especially anal sex
- contaminated blood (e.g. sharing needles for injection drug use)

symptoms

may be mild or severe and can include:

- fever
- malaise (feeling of being unwell)
- pain or discomfort in your stomach region
- anorexia
- feeling sick to your stomach
- skin and / or whites of eyes get yellowy color

testing

blood test

treatment

- in most cases, your body cures you of Hepatitis A, and once you've had it you can't get it again
- get plenty of sleep, eat a healthy diet, reduce/eliminate smoking and alcohol consumption
- do not prepare food for others
- to avoid spreading it to others, wash hands well after going to the toilet

complications

- severe damage to your liver (rare)
- can cause death (rare)

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name	■ **HEPATITIS B**
bacteria / virus / other	virus
transmission	• sexual contact • exposure to infected blood, saliva, semen and vaginal fluids • from mother to child during pregnancy, childbirth and breastfeeding (there are immunizations to greatly reduce the risk of transmission from mother to child)
symptoms	symptoms can be very mild to severe: • feeling tired • rash that can turn into jaundice • anorexia • feeling sick to your stomach, throwing up
testing	blood test
treatment	• about 90% of people with Hepatitis B are only affected by the virus for a short period of time - their body then cures itself • about 10% of people become chronic carriers of Hepatitis B - they can infect other people with the disease at any time. Because of this you need to: practice safer sex when you are hepatitis B positive; clean up blood spills with one part bleach to 9 parts water; don't share toothbrushes, razors, or sex toys • get plenty of sleep, eat a healthy diet, reduce/eliminate smoking and alcohol consumption
complications	• severe damage to your liver • can cause death
other	Hepatitis B virus can live up to 7 days on a dry surface.

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name

HEPATITIS C

bacteria / virus / other

virus

transmission

- contaminated blood (e.g. from shared needles and equipment for injection drug use, tattooing or body piercing - people who have shared drug snorting devices like straws have a higher than average chance of being infected by Hepatitis C)
- from mother to child during pregnancy, childbirth and breastfeeding
- sexual contact (less common)

symptoms

- feeling sick to your stomach, throwing up
- anorexia
- jaundice (less common)

testing

blood test

treatment

- your doctor or nurse will talk to you about medicines you can take to reduce the harmful effects of hepatitis C
- get plenty of sleep, exercise, healthy diet, reduce/eliminate smoking and alcohol consumption

complications

- severe damage to your liver
- can cause death

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name	**HERPES (genital herpes)**
bacteria / virus / other	virus
transmission	• direct contact with sores (oral, genital or anal) • if you have an outbreak of genital herpes, avoid all skin to skin contact from the initial tingle/buzzing sensation until after the crusts fall off the healed sores
symptoms	• tingle or "buzz" sensation at the site of infection • blisters and cold sores or cut like a "paper cut" in and around vagina, penis, testicles, thighs, bum, anus or anywhere there has been skin to skin contact - the blisters come and go • itching around vagina, penis and / or anus • tender sores in your crotch • the first time you get herpes you might get a really bad outbreak of sores, and you may also have a bad headache and fever some people have genital herpes but they don't notice any paper cuts, blisters or sores
testing	• a doctor or nurse will often have a good idea if you are infected just by looking at your vagina / penis / anus • a doctor or nurse may confirm if you have herpes by a lab test - your doctor or nurse will explain this
treatment	• if you think you have herpes, see your doctor or nurse right away: if your doctor or nurse thinks you have herpes they will prescribe a medication that will help control the outbreak of sores • your doctor or nurse may also recommend that you take medication when you have another outbreak of sores - in some cases the doctor or nurse will recommend that you take medication all the time

- keep the infected area clean and dry; wash your towel before you reuse it
- after you bathe, use a hair dryer instead of a towel around the sores -or gently pat the area dry with a towel
- try to wear loose fitting clothes made of natural fibers such as cotton
- if it hurts to pee try peeing in bath water - pouring warm water over the infected area may also help
- drink lots of water

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name	**HIV / AIDS (human immunodeficiency virus / acquired immunodeficiency syndrome)**
bacteria / virus / other	virus
transmission	• sexual contact • contaminated blood • from mother to baby during pregnancy, delivery and breastfeeding; there is medication to greatly reduce the risk of transmission from mother to child
symptoms	• usually no symptoms for many years after you get infected • as the years pass, your immune system gets weaker and your body becomes less and less able to fight disease
testing	blood test
treatment	• there is no cure for HIV • your doctor will talk to you about medicines you can take to reduce the harmful effects of HIV and increase the number of years that you will be feeling healthy • get plenty of sleep, exercise, healthy diet, reduce/eliminate smoking and alcohol consumption
complications	HIV attacks your body's defense (immune) system, so you don't get harmed directly by HIV - instead you get harmed by other infections that you body can longer fight off. You will eventually: • feel more and more tired • get colds more often • get skin rashes and infections • get cancers Most people infected with HIV die within 15 years of becoming infected.

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name

HUMAN PAPILLOMA VIRUS (HPV)
(causes genital warts / Condylomata acuminata)

bacteria / virus / other

virus

transmission

sexual contact (even dry skin to skin contact or rubbing when so symptoms are present)

symptoms

- small lumps that are cauliflower-like or hard, flat warts, usually in or around vagina, penis and / or anus
- sometimes itching or irritation
- sometimes bleeding (rare)

some males have "pearly papules" on the glans (head) of the penis - these are normal small lumps and are not warts

many people have HPV, the virus the causes genital warts, but they don't have any symptoms

testing

- visual inspection of penis, vagina and / or anus revealing warts
- females can have a Pap test (when a clinician takes a sample of cells from your cervix) - certain Pap test results indicate there is a probability of HPV infection

These methods are the most common testing / diagnosis methods. Your doctor or nurse may recommend other testing / diagnosis methods in addition to these.

treatment

- there is no cure for HPV
- the doctor or nurse can treat the warts to try to get rid of them
- the doctor or nurse may offer to prescribe you medication that you put on the warts yourself
- ask your doctor or nurse about other treatments for HPV

- females who have HPV should have a Pap test done once a year - talk to your doctor or nurse about this
- your cells may over time become immune to HPV

complications

- cancer of the cervix
- possible link with cancer of anogenital tract

name

PUBIC LICE *("crabs")* AND SCABIES

bacteria / virus / other

insects causing skin infestations

transmission

- sexual contact (direct contact between genitals)
- indirect contact (e.g. contact with bed sheets, towel of someone infected with public lice and / or scabies)

crabs can live away from people (e.g. on bed sheets, towels) for 24–48 hours

symptoms

pubic lice:

- an itch in the public area
- bluish spots in pubic area or thighs where you have been bitten
- light brown insects the size of a pinhead may be seen
- oval, whitish eggs may be seen on the pubic hair
- sometimes you can see the lice in your underwear

scabies:

- itching, mainly at night or after a bath or exercise
- a rash may appear between your fingers, on your wrists, in your elbows, abdomen, around your genitals, hands, arms, armpits, feet, ankles or bum

testing

pubic lice:

- the doctor or nurse will normally try to positively identify the insect or inspect the genital area for "tell tale" signs of the insect

scabies:

- inspection of skin

treatment

- public lice and scabies can be cured
- use a special cream, lotion or shampoo as directed by your doctor, nurse or pharmacist - follow all of the directions carefully

1 877 YK STYLE

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name

■ SYPHILIS

bacteria / virus / other

bacteria

transmission

- sexual contact
- contact with contaminated blood (e.g. shared needles from injection drug use, bloody saliva, sharing tattooing instruments)
- a pregnant mother can pass syphilis to her baby

symptoms

Syphilis has 3 stages:

Stage 1 - around first 3 months of infection

- painless sore(s) where the syphilis germs enter the body
- sores may go away on their own if not treated, but the infection is still active and you can infect others
- you may not notice any symptoms

Stage 2 - around 6 weeks after the sores appear and lasts up to 10 weeks

- "flu-like" symptoms
- rash on palm of hands, soles of the feet , or over the whole body
- loss of patches of hair
- symptoms may go away on their own if not treated, but the infection is still active and very contagious

Stage 3 - around 10-30 years after initial contact

- large ulcers on skin and bones
- damage to heart and brain
- death is possible if untreated

testing

- blood test
- doctor or nurse will also examine your physical symptoms and "take your history" to help in diagnosis

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

treatment

- syphilis is curable
- the doctor or nurse will prescribe antibiotic medication
- if you have syphilis for a long time the damage it causes your body may be permanent

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

name	**TRICH (trichomoniasis)**
bacteria / virus / other	one celled protozoan
transmission	• sexual contact • exposure to trich in certain environments (e.g. hot tubs, whirlpools)
symptoms	females: • a new or different discharge from the vagina, usually frothy or bubbly yellow, green or white • itching, especially at night • a burning feeling when peeing • a pain in the lower abdomen (lower stomach area), sometimes with fever and chills • pain during sex • bleeding between periods • bleeding after sex males: • usually no symptoms • clear discharge from the penis may appear
testing	doctor or nurse takes a swab from the penis or vagina
treatment	• trich is curable • doctor or nurse will prescribe antibiotic medication

sexually transmitted diseases (STDs)

and other conditions that can affect your reproductive system

YEAST INFECTIONS

name

yeast

bacteria / virus / other

yeast

transmission

- yeast is always present in the vagina
- sometimes too much yeast will grow (e.g. when taking antibiotic medication, eating certain foods, during stress, from douching, during pregnancy or using birth control pills)

yeast can be passed from one person to another by sexual contact

symptoms

females:

- itching or redness in and / or around vagina
- clumpy white discharge from vagina
- sometimes no symptoms

males:

- penis may become red and itchy - rash

testing

- doctor or nurse will take a swab from vagina
- visual inspection of vagina or penis

treatment

- your doctor, nurse or pharmacist will tell you what medication to get

how to help prevent problems with yeast

- wear clean, loose fitting clothes made from natural materials
- avoid tight pants, pantyhose and leggings that may cause the vaginal area to stay damp
- avoid using feminine hygiene sprays, scented pads or scented tampons
- avoid wearing panties to sleep in — some women with yeast problems need to avoid pyjama bottoms as well
- avoid vaginal douches

puberty and reproduction

PUBERTY

what is puberty?

- puberty is a normal healthy part of growing up
- it usually starts sometime between age 8 and 12
- it occurs so our bodies mature and we gain the ability to have children
- just because our bodies are capable of having children, it doesn't necessarily mean we feel ready or we want to have children
- every person must decide for themself if they are ready and if they want to have children

Keep in mind that the timing and extent of everyone's changes during puberty is a little unique.

what are the changes that occur during puberty?

- getting feelings of sexual attraction to others;
- having growth of your vagina or penis so that it's capable of producing babies with a person of the opposite sex;
- getting facial pimples;
- getting body odor;
- masturbation occurring more often (masturbation means touching your own genitals or other body parts for sexual pleasure and having sexual fantasies);
- having an increased appetite;
- getting taller and gaining weight;
- getting a deeper voice, usually much deeper if you are male;
- getting body hair and hair around your genitals (males usually get lots more body hair than females);
- having sudden mood changes;
- feeling more worried about what others are thinking about you;
- feeling more worried about your physical appearance;
- wanting more freedom to make decisions;

- having more disagreements with your parents or guardians; and
- feeling more concern for other people.

All of these changes are perfectly normal.

CHANGES JUST FOR GIRLS AND FEMALE REPRODUCTION

changes just for girls

Girls usually have a growth spurt between age 11 and 16. A growth spurt is a period of rapid growth. Some common changes that only happen to girls are:

- breasts developing;
- hips getting wider;
- starting to have their period; and
- starting to have a small amount of fluid coming out of the vagina once in a while

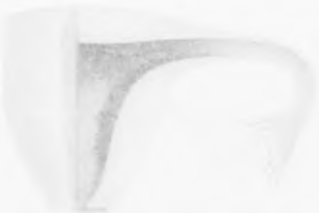
menstruation or having your period

- girls usually have their first period sometime between age 9 and 16
- having your period is called menstruation and it's a sign that you're growing up and your body is becoming capable of becoming pregnant and having babies

puberty and reproduction

the menstrual cycle and female reproduction

- when you think about a female's body, imagine that there is a nest inside of her, below her stomach
- the nest is called her uterus or womb
- each month there is a bed of tissue in the nest that grows a little bit, this bed is called the endometrium
- just above the nest there are 2 egg sacs called ovaries
- each egg sac is attached to the nest by its own tube
- while the bed of tissue in the nest is growing, usually a single egg, sometimes called an ovum, gets released from one of the egg sacs and travels down its tube toward the nest
- the release of the egg is called ovulation
- if a sperm cell from the male combines with the egg in the tube, we say that the egg has been fertilized



- the only natural way a sperm can fertilize an egg in the female's tube is if sperm comes out of a male's penis in or around the female's vagina
- the fertilized egg will continue down the tube and may attach itself to the bed of tissue lining the nest
- at this point, if the fertilized egg ***does*** attach itself to the bed of tissue, we say that pregnancy has begun
- if the egg is not fertilized when it travels from the egg sac to the nest, it will not attach itself to the bed of tissue in the nest
- instead, the egg and the entire bed of tissue will leave the nest
- the egg and the entire bed of tissue will break down and travel out of a narrow opening called the cervix then into the vagina
- from the vagina they will leave the female's body
- the tissue contains skin cells, liquid blood, blood that has clotted, and is usually mostly red but may be partly black
- the tissue and blood take about 3 to 7 days to leave the female's body through her vagina, but during that entire time there is rarely more than a few tablespoons of blood and tissue
- the process of blood and tissue leaving the female's body is called menstruation
- the whole process of the nest being created, an egg released, finally followed by menstruation is call the menstrual cycle

puberty and reproduction

when will my cycle get regular?

- for females who have just started to have their period, it may take a few years for their period to occur "on a regular basis (e.g. once a month)"
- in fact, the most common thing for most females during these first years is for their period to be very irregular
- when and how often it will come, how much blood and tissue will come out, and how many days that blood and tissue come out can be impossible to predict for females who have only recently started having their period

what's PMS?

In the days leading up to your period each month, you may feel moody or sad, have pain around your breasts and feel like your whole body is swelling up a bit. This is called PMS or premenstrual syndrome and is a common occurrence for many females. Some ways to reduce PMS include:

- reducing caffeine intake: coffee, regular tea and colas all have caffeine;
- exercising regularly;
- eating nutritious foods;
- getting enough sleep;
- reducing or better still, eliminating smoking.

it hurts when I have my period...

- during your period you may feel pain or cramping around your uterus
- this is common for many females
- you can talk to a trusted older friend or your health care provider about ways to reduce the pain
- many females find that the drug called ibuprofen is effective at relieving this pain
- ibuprofen is available at drug stores, and at many corner and grocery stores
- you don't need a prescription to buy ibuprofen

tampons and sanitary pads...

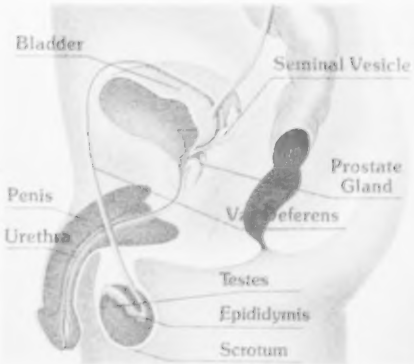
- females can use tampons or sanitary pads to absorb the menstrual blood and tissue
- be sure to follow the instructions on the product you use
- never leave a tampon in your vagina for more than 8 hours

CHANGES JUST FOR BOYS AND MALE REPRODUCTION

changes just for boys

Boys usually have a growth spurt sometime between age 13 and 17. Some common changes that only happen to boys are:

- their shoulders get broader;
- they get hair or whiskers on their face;
- their penis gets hard, in other words, they have erections more often; and
- they may have wet dreams - that's when they have a dream and they ejaculate during their sleep.



ejaculation and reproduction...

- ejaculation means whitish creamy fluid carrying sperm cells comes out of the penis - at the same time the male feels pleasurable muscular contractions

puberty and reproduction

- sperm cells are produced in the male's testicles/testes or "balls"
- when a male ejaculates, millions of sperm cells leave an area around the "balls" and travel through a tube toward the penis
- before they pass through the penis they combine with fluid from a few fluid sacs inside the male's body near his penis
- the combination of sperm cells and fluid from these sacs is called semen
- the semen comes out of the male's penis through the same tube he pees out of
- if a male's penis is in or very near to a female's vagina and he ejaculates, some of the semen carrying its millions of sperm may travel up the female's vagina, through the cervix and into the uterus or nest area, then up both of her tubes
- if a sperm cell combines with an egg cell from a female, a sperm cell will contribute half of the instructions on how a fertilized egg will develop
- the other half of the instructions come from the egg cell
- the joining of an egg cell and sperm cell is called fertilization

what are wet dreams?

- wet dreams are when a male ejaculates during his sleep
- almost all males have wet dreams from time to time during puberty
- even adult males may have a wet dream

GENERAL INFORMATION

feeling attracted to other people...

- most sexual attractions are to people of the opposite sex
- most people choose people of the opposite sex to go out with and maybe to have sex with
- attraction to people of the opposite sex may be called heterosexual attraction
- people who go out with and / or choose to have sex with people of the opposite sex may consider themselves heterosexual

feeling attracted to people of the same gender or same sex...

- attraction to people of the same sex may occur to many people, even to people who consider themselves heterosexual
- a smaller amount of people choose people of the same sex to go out with and maybe to have sex with
- attraction to people of the same sex may be called homosexual attraction
- people who go out with and / or choose to have sex with people of the same sex may consider themselves homosexual

gay, lesbian and bisexual?

- some males who are attracted to other males call themselves gay
- some females who are attracted to other females call themselves lesbian
- some people are sexually attracted to both males and females; these people may go out with and / or choose to have sex with males ***and*** females; some people who this describes may call themselves bisexual

GETTING SUPPORT

everyone has rights

- no matter what anyone's beliefs and values are about sexual orientation, all people have basic human rights
- this means that all people have the right to be free from discrimination
- discrimination could include name calling, threats, physical violence, and not giving the same chances and opportunities to someone

- you can get more information on human rights by contacting the Yukon Human Rights Commission (see page 131)

getting support from people

- many people who do not consider themselves heterosexual experience discrimination and often benefit from talking to caring people about what they're experiencing
- people that may be available to talk to and for support may include:
  - family
  - trusted friends
  - health care providers
  - women's groups
  - counselors
  - church clergy
  - social workers

agencies that offer additional support include:

- Gay and Lesbian Alliance of the Yukon
- AIDS Yukon Alliance
- Victoria Faulkner Women's Centre

See page 131 for addresses and phone numbers of these agencies.

STD PROTECTION

how can I protect myself from STDs if I have a sexual relationship with someone of the same gender?

- protecting yourself from getting an STD if you have sex with people of the same sex is basically like protecting yourself from STDs when having sex with people of the opposite sex
- for more information turn to the STD section of this guide (page 91)

GENERAL INFORMATION

Violence and abuse in relationships just doesn't happen to people living together. It can happen the first time you meet someone. The violence and abuse can come in many forms. It can include:

- physical violence, like hitting, pushing, punching, slapping, even stopping you from leaving;
- sexual abuse, like unwanted touching, rape or forcing you to have sex, gang rape, sleeping around, or sexual put downs;
- verbal abuse, like threats, name calling, yelling, being sarcastic, always blaming you for problems and laughing at you;
- emotional abuse, like scaring you, playing mind games and criticizing how you act;
- financial abuse, like taking money from you, controlling all the decisions in your family about money and not letting you work outside of home; and
- social abuse, like put downs in public, embarrassing you in front of your children, not letting you see your friends or being rude to your friends; and
- abuse against your children, which could be any form of abuse, physical, sexual, emotional or social.

Many of these forms of violence and abuse are a crime - they are against the law.

RAPE

how can I reduce my chances of sexual assault and rape?

- hang out with people who have earned your trust;
- avoid drinking large amounts of alcohol or using drugs, especially when you are around people who haven't earned your trust;

rape and abuse

- don't hang out with people who have a reputation for trying to force people to have sex with them; and
- avoid isolated places, dark places or any place where you couldn't get help if someone tried to rape or attack you.

rape can occur on a date by someone you know

- you may go out with someone and they could force you to have sex with them or they may try to touch, hug or kiss you against your will
- you have to decide for yourself how far from help and other people you will choose to be when you are with a date

if you've been raped or abused: getting help or keeping it a secret?

- if you have been abused in any way it's important not to keep it a secret
- try to talk about what you're going through or what happened to people who have earned your trust
- you may also try talking to a counselor
- it's a very good choice to see a doctor or nurse as soon as possible if you have been raped
- they will discuss STD testing, emergency birth control, and other medical procedures with you
- since rape and many forms of abuse are criminal offences, you should also consider talking to the RCMP

CYCLE OF ABUSE

a cycle of abuse...

If you are abused by someone you are going out with or living with, you may notice a cycle of abuse. It may happen something like this:

- first there is a build up of tension and anger, sometimes even an argument;
- next, the abuser explodes and may become violent, make threats and verbally abuse;
- then there is a cool down period - a make-up or calm stage - the abuser may apologize, may promise it will never happen again and may even do something nice;

- after that there is a time of relative peace which is usually temporary;
- sooner or later tension begins again and the cycle repeats itself.

it doesn't matter why you are being abused, abuse is ALWAYS wrong...

- there are many reasons why people abuse other people
- no matter what the reason, abuse is wrong
- anyone who abuses another person must take responsibility for their behavior
- no matter what you do, you do not deserve to be abused

GETTING OUT OF AN ABUSIVE RELATIONSHIP

why can it be hard to get out of an abusive relationship?

There are lots of reasons why people stay in abusive relationships. Some of the reasons abused people stay in the abusive relationship are that:

- they feel responsible for the problems in the relationship;
- they feel no one else will love them;
- they believe their partner when their partner blames them for the abuse;
- they are afraid of rejection from family, friends and community;
- they are afraid of losing children;
- they are afraid of the abuser's threats to commit suicide or the abuser's threats to kill them;
- they are afraid of going to court or calling the police;
- they don't have social support and are isolated from family and friends; and
- they are afraid they won't have enough money.

it's your right to be free from abuse...

- if you are being abused by someone you are going out with or living with, it's your choice on whether you stay in the relationship and try to work things out, or to break up
- remember, it is your right to be free from abuse

rape and abuse

an emergency plan if you stay in an abusive relationship ...

- if you choose to stay in an abusive relationship, one thing that may help you is to make an emergency plan
- in your plan you set a limit to the amount of abuse you will tolerate, and set out time lines for things to get better
- you also set out how you will react quickly to an emergency, such as if the abuser begins to assault you
- if you have kids, you decide how you're going to protect your kids in an emergency situation
- if you're living with the abuser, it's also a good idea to outline where you plan to stay, how you plan to get there, your escape route and to have emergency phone numbers on hand
- finally, you should let trusted friends and police know what's going on

how to leave an abusive relationship...

- if you choose to leave but you haven't taken the step yet, it's a good idea to plan how you're going to leave
- set time deadlines for yourself to help you carry through with your choice
- the plan can include the same sorts of details as an emergency plan (see above)

where can females and their children stay for protection?

- there are transition homes in many Yukon communities
- these are safe places females and their children can go to where they will be safe from an abuser
- females can call any Yukon transition home collect 24 hours a day. Here are their names and phone numbers:

- Kaushee's Place in Whitehorse, 668-5733
- Dawson City Women's Shelter, 993-5086
- Help and Hope for Families in Watson Lake, 536-2711
- Carmacks Safe Home, 863-5918 or after hours, 863-5385

where can females AND males go for help?

- males and females can get help by contacting the Family Violence Prevention Unit, weekdays during normal working hours (see page 131)
- if you feel you are in danger or if you have been assaulted, there is someone in your community who is available for help right away
- in an emergency call the police or the Family Violence Prevention Unit (see page 131)
- you have the right to protection: there are laws in the Yukon that provide immediate and long term protection to people from assault and abusive relationships

Much of the information is this section was adapted from the booklet ***"Choices Changes Options"*** *published by the Yukon Women's Directorate. Free copies can be ordered by calling 1-800-661-0408, extension 3030.*

community resources

CLINICS

doctor clinics

Dawson
- Medical Clinic, 993-5744

Faro
- Doctor's Clinic, 994-4444

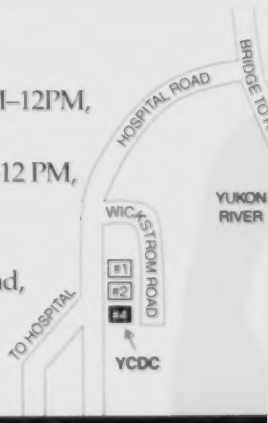
Mayo
- Doctor's Clinic, 996-4444

Watson Lake
- Parhelion Medical Clinic, 536-2565

Whitehorse
- Branigan Clinic, 106 Lambert Street, 667-6491
- Canyon Mountain Medical Centre, 3059-3rd Avenue, 633-3111
- Klondyke Medical Clinic, 3089-3rd Avenue, 668-4065 or 668-4060
- Pine Medical Clinic, 5110-5th Avenue, 668-4353
- Dr. Skinner's Medical Clinic, 3059-3rd Avenue, 633-2223
- Whitehorse Medical Services, 406 Lambert Street, 393-6646
- Obstetrician / Gynecologist, 668-2201 (normally you must be referred by a doctor to see the obstetrician / gynecologist)

Whitehorse nurse clinics

- White House Community Services, Monday, Wednesday, Friday, 1-3PM, 107 Jarvis
- Kwanlin Dun Health Centre, Monday - Friday, 9AM–12PM, 1PM–5 PM, 35 McClimmon Crescent, 668-7289
- Whitehorse Health Centre, Monday - Friday, 8 AM–12 PM, 12:30–4PM, 300-211 Main Street, 667-6371
- Yukon Communicable Disease Control (YCDC), Monday - Friday 7:30 AM–3:45 PM, #4 Hospital Road, 667-8323 or 1-800 661-0507 *(see map)*



community nursing stations and health centres

- Beaver Creek, 862-4444
- Carcross, 821-4444
- Carmacks, 863-4444
- Dawson City, 993-4444
- Destruction Bay, 841-4444
- Faro, 994-4444
- Haines Junction, 634-4444
- Mayo, 996-4444
- Pelly, 537-4444
- Teslin, 390-4444
- Old Crow, 966-4444
- Ross River, 969-4444
- Watson Lake, 536-7483

HOSPITALS

- Watson Lake Cottage Hospital, 536-4444
- Whitehorse General Hospital, #5 Hospital Road, 393-8700

FIRST NATIONS

First Nations offer a variety of health and social programs. for more information call the First Nation directly.

- Carcross / Tagish First Nation, 821-4251
- Champagne / Aishihik First Nation, 634-2288
- Council of Yukon First Nations, 393-9200
- Na-cho Nyak First Nation, 996-2265
- Kaska Tribal Council, 536-2805
- Kluane First Nation, 841-4274
- Kwanlin Dun First Nation, 633-7800
- Liard First Nation, 536-2131
- Little Salmon Carmacks First Nation, 863-5576
- Ross River Dena Council, 969-2277

community resources

- Selkirk First Nation, 537-3331
- Ta'An Kwach'An Council, 668-3613
- Teslin Tlingit Council, 390-2532
- Tr'on dek Hwech'in First Nation, 993-5385
- Vuntut Gwitchin First Nation, 966-3261, and
- White River First Nation, 862-7802

PHARMACIES

- Medicine Chest Pharmacy, 668-7000, outside Whitehorse call 1-800-661-0404
- Pharhelion Medical Services Pharmacy (Watson Lake), 536-2568
- Shoppers Drug Mart, 667-2485 or 667-6633, outside Whitehorse call 1-800-661-0506
- Superstore Pharmacy, 633-8335, outside Whitehorse call 1-800-661-0516

SUPPORT FOR REDUCING OR STOPPING ALCOHOL/DRUG ABUSE

you can get support from friends, health care providers and community resource people for reducing or stopping alcohol / drug use; these places also offer assistance:

- Your local social worker
- Alcohol and Drug Services, 667-5777 or 1-800 661-0408, extention 5777
- Al-Anon, 667-7142
- Alateen, 667-7142
- Breathe Free Quit Smoking Program, 633-5385
- Alcoholics Anonymous, 668-5878
- Detox Centre, 667-8473
- Fetal Alcohol Syndrome Society of Yukon, 633-3051 or 667-2985
- Tobacco Reduction Program, 667-8394 or 1 800 661-0507, extention 8394
- Yukon College Public Health and Safety, 668-5200
- Yukon Family Services Association, 667-2970

females can call any Yukon transition home collect 24 hours a day

WOMEN'S SHELTERS

- Carmacks Safe Home, 863-5918 or after hours, 863-5385
- Dawson City Women's Shelter, 993-5086
- Kaushee's Place in Whitehorse, 668-5733
- Help and Hope for Families in Watson Lake, 536-2711

OTHER

- AIDS Yukon Alliance, 7221-7th Avenue, Whitehorse, 633-2437 (collect calls accepted)
- Family and Children's Services, 1-800 661-0408, extention 3002 or 667-3002
- Family Violence Prevention Unit, 667-3581 or 1-800 661-0511
- La Leche League (breastfeeding support), 667-4574
- Police, 911 in Whitehorse, community prefix# + 5555 outside Whithorse
- Travel for Medical Treatment Program, 667-5203 or 1-800 661-0408, extension 5203
- Victoria Faulkner Women's Centre, 667-2693 (collect calls accepted)
- Yukon Health Care Insurance Program, 667-5209 or 1-800 661-0408, extension 5209
- Yukon Human Rights Commission, 667-6226 or 1-800 661-0535
- Whitehorse General Hospital First Nations Health Program, 667-8780
- Women's Directorate, 667-3030 or 1-800 661-0408, extention 3030

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Yukon Medical Association

Yukon
Health and Social Services